Undergra Graduate			Prepared By: Phone:		
		REQUEST FO CHANGE PROGRAM/ACADI	IN		
College/School:					
Academic Program: Degree (Include major as part of name. Example: BS in Engineering Physics - BSEP) Major/Professional Field (Name of major separate from degree. Example: BS w/a major in Journalism) Concentration (Under major/professional field. Example: BS w/major in Journalism and concentration under major in Broadcast News) Option (Career track; leading to certification, license) Minor Academic Unit (Name of college/school/department/institute, etc.) Other (CB approved certificate program. Example: Certificate in College of Music) Name/Title (current):					
Requirements (cut and paste from current Undergraduate or Graduate Catalog) Page number(s):					
Will change increase total number of hours required for Degree? Will change increase total number of hours required for Major? Yes No If yes, hours will increase by total number of hours.					
	Change Requested: (Check all that apply)	Title: Requirements:	Hours: Other		
CHANGE TO: (complete only those categories being changed)					
Name/Title (ne	w):				
New Require	ments				

Justification for change:

Consultation with other colleges/schools/departments affected by change:

Department: Contact: Date:
Department: Contact: Date:
Department: Contact: Date:

APPROVED: APPROVED:

Department Chair:	Date:
School	
Committee Chair:	Date:
	Date:
Dean of College/School:	
University Curriculum	
Committee Chair:	Date:
Duorvooti	Doto
Provost:	Date: