KINGSBOROUGH COMMUNITY COLLEGE
The City University of New York

CURRICULUM DATA TRANSMITTAL SHEET

DEPARTMENT ____________________  DATE _______________

Title of Course or Degree: _____________________________________________

Change(s) Initiated: (Please check)

☐ Closing of Degree  ☐ Change in Degree or Certificate Requirements
☐ Closing of Certificate  ☐ Change in Degree Requirements (adding concentration)
☐ New Certificate Proposal  ☐ Change in Pre/Co-Requisite
☐ New Degree Proposal  ☐ Change in Course Designation
☐ New Course  ☐ Change in Course Description
☐ New 82 Course  ☐ Change in Course Titles, Numbers, Credits &/or Hours
☐ Deletion of Course  ☐ Change in Academic Policy
☐ Other (please describe): ______________________________________________

PLEASE ATTACH PERTINENT MATERIAL TO ILLUSTRATE AND EXPLAIN ALL CHANGES

I. DEPARTMENTAL ACTION

Action by Department and/or Departmental Committee, if required:

Date approved_________________Signature, Committee Chairperson:__________________

Signature, Department Chairperson: __________________________________________

II. PROVOST ACTION

Provost to act within 30 days of receipt and forward to College-wide Curriculum Committee exercising one of the following options:

A. Approved ☐  B. Returned to department with comments ☐

Recommendations (if any): ____________________________________________________

Signature, Provost: ___________________________ Date: _______________

III. CURRICULUM SUB-COMMITTEE RECOMMENDATIONS:

A. Approved ☐  B. Tabled ☐ (no action will be taken by Curriculum Committee)

Recommendations (if any): ____________________________________________________

Signature, Sub-Committee Chair: ___________________________ Date: _______________

IV. COLLEGE-WIDE CURRICULUM COMMITTEE ACTION

Committee to act within 30 days of receipt, exercising one of the following options:

A. Approved ☐ (forwarded to Steering Committee)
B. Tabled ☐ (Department notified)
C. Not Approved ☐ (Department notified)

Signature, Chairperson of Curriculum Committee___________________________ Date: _______________

Revised/Oct.2013