



مكتب نائب وكيل الجامعة لشؤون برامج البكالوريوس والتدريس OFFICE OF THE VICE PROVOST FOR UNDERGRADUATE AFFAIRS AND INSTRUCTION

## Course Revision Approval Form

School/College Curriculum Committee Chair Signature	Date	Vice Provost Signature	Date
Department Head Signature	Date	School/College Dean Signature	Date
Rationale:			
Revision:			
Catalog Term:			
Effective Term:			
Course Title:			
Course Subject/Code:			