TO: FACULTY, HIMDAG COMMITTEE, & ADMINISTRATION
FROM:
SUBJECT: COURSE CHANGE
DATE:
CC: DEAN OF ACADEMICS

1. Name of Initiator(s):

2. What is name of course being changed: (include course number and prefix)

3. What are the changes that are being requested for this course?

4. Statement of purpose for the course change. Be sure to address how the changes improve student learning and student outcomes.

5. Does the course change require a change to any of the programs of study (if yes, please attach program of study change request)?

6. Does the course change require changes to way the course addresses the O’odham Himdag, if ‘yes’ how?

(If available attach original course documentation)