

# Request for Course Deletion

Department Chair Name: \_\_\_\_\_

Course Number: \_\_\_\_\_

Course Title: \_\_\_\_\_

Course Units: \_\_\_\_\_

Please circle appropriate answer.

1. Why are you deleting this course?

- No longer offered on a regular basis.
- No faculty currently available to teach the course.
- Other (explain)

2. If this course is a major or minor requirement, does deleting it impact your students?

- No
- Yes (explain)

3. Is the deleted course cross-listed or does it contribute to other programs?

- No
- Yes (explain)

4. If the answer to 3 is "yes," please have the director/chair of those programs approve the change.

\_\_\_\_\_  
\_\_\_\_\_

Signature(s)

5. Does the proposed deletion carry Gen Ed credit?      • Yes    • No

If yes, does your program offer alternatives?      • Yes    • No

6. No