

BERKELEY COLLEGE
CURRICULUM APPROVAL AND REVIEW FORM

SCHOOL:

DEPARTMENT:

PROGRAM:

NAME OF SUBMITTER:

DATE SUBMITTED:

BERKELEY COLLEGE GOALS:

- _____ Goal 1: Optimize the Student Learning Experience
- _____ Goal 2: Attract, Retain, and Graduate Students
- _____ Goal 3: Develop Strategic Partnerships
- _____ Goal 4: Build a Compelling Identity
- _____ Goal 5: Be Affordable and Fiscally Responsible

TYPE OF SUBMISSION:

_____ **NEW PROGRAM**

New Jersey: Attached Program Approval Document

New York: Attached Program Registration Application

Attached New Program Entry Form

_____ **NEW COURSE**

Name of Course: _____

Course Number: _____

Rationale for New Course:

Attached Course Syllabus

Attached Course Catalog Entry Request Form

PROGRAM ALTERATION

Concise description of Program Alteration:

Rationale for Program Alteration:

Attached Revised Program

Attached Revised Program Sequence

Attached New Program Entry Form

COURSE ALTERATION

Current Name of Course: _____

Current Course Number: _____

New Name of Course: _____

New Course Number: _____

Concise description of Course Alteration:

Rationale for Course Alteration:

Attached New Course Syllabus

Attached Course Catalog Entry Request Form

PROGRAM DELETION

Rationale:

COURSE DELETION

Rationale:

Required Signatures for Approval:

Department Chair

Dated

School Dean

Dated

College Curriculum Committee, Chair

Dated

Provost

Dated

President

Dated

Acknowledgement of receipt:

Registrar: _____

Dated