ROUTING FORM FOR PROPOSED CHANGES TO ACADEMIC POLICY, CURRICULUM CHANGES, STATUTES EAST GEORGIA STATE COLLEGE

| NAME OF POLICY/ PROPOSAL: | | | | |
|---|-----------------------------------|-----------------------------|----------------------------------|--------------|
| Attach a complete copy of the proposed | I change as acted upon by the APC | CC or Faculty Senate. If cl | nanges made to proposal prio | r to adoptin |
| please note the person and governance | body making the change on the p | roposal, initial and date | the change. Copies of approp | riate |
| documentation should be attached to the | ne form with each submission and | should be retained at ea | ich level. Please indicate the t | ype of prop |
| being submitted: | | | | |
| New Course | New Degree Program | Changes t | o Degree Program Require | ments |
| Deactivate Course | Discontinue Course | | e Course | |
| Discontinue Course | Deactivate Degree Progr | | ue Degree Program | |
| Reactivate Degree Program | Deactivate Degree 110g | Statutes | | |
| | Delias Desiales | | | |
| Policy Proposal. | Policy Revision | Otner: | | |
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| | MIC POLICIES AND CURR | ICOLOIVI COIVIIVII I | IEE (APCC) | |
| Initiated and Submitted to APCC | | | | |
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| Signature | | Date | | |
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| AVD AA Ammuusid | | | | |
| AVP AA Approval: | | | | |
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| Signature | | Date | | |
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| APCC Action: Approved D | Denied Returned | Tabled | | |
| ••• ==== | | | | |
| Signature of Vice President for A | cademic and Student Affairs | | Date | |
| signature of vice Fresident for A | cadeffic and Student Arians | o, Cilali | Date | |
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| Comments: | | | | |
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| APCC Chair submits to Faculty Se | enate | | | |
| The continuous for active se | | CENIATE | | |
| | FACULTY : | <u>DLIVATL</u> | | |
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| Faculty Senate Action: | Approved Der | ied Returned | Tabled | |
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| Signature of Faculty Senate President | | Date | | |
| , | | Date | | |
| Comments: | | | | <u></u> |
| Faculty Senate President sends t | | | | |
| Note: Revisions to EGSC Statutes re | | | | |
| Counsel for routing to President's C | Cabinet and routing to Preside | nt. Please indicate "E | GSC Statutes revision" on | <u>this</u> |
| orm. | | | | |
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| | PRESID | FNT | | |
| Oursident/s/andesismos/s) Actio | | | Tabled | |
| President's (or designee's) Actio | n: Approved Der | ilea Keturned | і аріец | |
| | | | | |
| Signature | | Date | | |
| Comments: | | | | |
| Distribution By: | | | | |
| distribution by: | | | | |
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| Signature | | Date | | |
| President's Office keeps a copy o | of this ACADEMIC POLICY/P | ROPOSAL ROUTING | FORM; Original form is | sent to |
| Academic Affairs for distribution | | | , 6 | |
| Academic Analis for distribution | to the following. | | | |
| aculty Sanata — Pracident | | Data | | |
| Faculty Senate—President | | Date | | |
| APCC Chair/ VPASA | | Date | | |
| Chief of Staff/Legal Counsel | | Date | | |
| | | | | |
| Registrar's Office | | Date | | |