

EASTERN MICHIGAN UNIVERSITY
DIVISION OF ACADEMIC AFFAIRS

Proposal Review Form
College of _____

Complete and return this form to the Course and Program Development Office by the Review Deadline. Failure to return the form by the Review Deadline signifies a recommendation to **Approve** the proposal.

Distribution Date: _____ Review Deadline: _____
Sponsoring College: _____ Department: _____
Program: _____
Type of Proposal: New Course _____ Course Revision/Deletion _____
 New Program _____ Program Revision _____
 New Certificate _____
Academic Level: Undergraduate _____ Graduate _____

Recommendation of the Reviewing Council. (Check one of the following.)

_____ Approve
_____ Approve with Comments
_____ Do Not Approve
_____ Table Pending Additional Information

If Recommendation other than Approve is selected above, please explain.

Council Vote on the above Recommendation was:

For _____ Against _____ Abstentions _____

Council Chair Signature

Date

Action of Dean

I concur _____ do not concur _____ with the above recommendation.

College Dean (or designate) Signature

Date