

CURRICULUM COMMITTEE COURSE DELETION FORM

ADM 134
REV 8/2016

DATE:

DEPARTMENT CHAIR:

DEPARTMENT:

DISCIPLINE WHERE COURSE RESIDES:

(CHECK ALL THAT APPLY)

DELETE EXISTING COURSE FROM COURSE INVENTORY

DELETE EXISTING COURSE FROM CATALOG

Course Title:
Course Prefix:
Course Number:
Course Prerequisites:
Core/General Education Course: <input type="checkbox"/> Yes <input type="checkbox"/> No
Rationale for Deletion:
Will this deletion impact other departments? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, provide an explanation how this request has been addressed and received by other departments. You may also provide letters of support from impacted departments.
Last semester course was offered at Del Mar College:
Proposed Effective Date (Semester/Year):

Signature Indicates Approval:

Department Chair: _____

Date: _____

Dean: _____

Date: _____

Curriculum Committee Approval: Yes No

Date: _____

Curriculum Committee Chair: _____

Date: _____

Provost/Vice President for Academic Affairs: _____ Date: _____

Distribution of Copies by the Office of the Provost/Vice President for Academic Affairs:

(Original remains in the Office of the Provost/Vice President for Academic Affairs)

Curriculum Committee Website

Division Dean

Financial Aid Director

Registrar

Department Chair