

COURSE PROPOSAL COVER SHEET

I. Co-Instructors

Please attach short CV's (five pages or fewer)

Name, Department:

Name, Department:

II. Course Title

III. Preferred Quarter

Please indicate order of preference (1, 2, and 3).

Autumn

Winter

Spring

IV. Departmental Authorization

Signatures of department chairs are required.

Department Chair (print name):

Department Chair (signature):

Department Chair (print name):

Department Chair (signature):

V. CCT

Have you discussed your syllabus with CCT?

Yes

No