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## PROPOSED CURRICULUM CHANGE FORM

This form should be used by faculty to propose a curriculum change, including concentration required courses or changes to individual courses, at the Rutgers School of Public Health. Please type or print legibly. Submit a signed form (signed by your Department Chair) to the Curriculum Committee at least two weeks before a meeting and no later than second month of the semester prior to the one in which the proposed change will be effective.

1. **Course Title/Program:** \_\_\_\_\_
2. **Sponsoring Department/Program:** \_\_\_\_\_
3. **Instructor(s), if applicable:** \_\_\_\_\_
4. **Proposed Action:** \_\_\_\_\_
5. **Detailed Description of Proposed Curricular or Program Modification, Addition or Deletion:**

The curriculum change would be effective \_\_\_\_\_ Semester, \_\_\_\_\_ (Year) for the students currently enrolled or incoming class of \_\_\_\_\_ Semester, \_\_\_\_\_ (Year).

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\_\_\_\_\_  
Department Chair/Concentration Director Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Associate Dean for Academic Affairs Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Curriculum Committee Chair Signature

\_\_\_\_\_  
Date

*Reviewed and Approved by the Curriculum Committee on \_\_\_\_\_, by a vote of \_\_\_\_\_.*

*(FOR OFFICE OF THE REGISTRAR USE ONLY)*

Course Number (if applicable): \_\_\_\_\_

Course Title (if applicable): \_\_\_\_\_

Date(s) Curriculum Change distributed to each Department/Program and updated on website: \_\_\_\_\_

\_\_\_\_\_  
Office of the Registrar Signature

\_\_\_\_\_  
Date