PROPOSAL TO DELETE A COURSE

1)	The course to be deleted:			
	Department:	Number/Level	: Credits:	
	Title:			
	Description:			
2)	Other Affected Departments or Programs: (If this deleted course is currently cross-listed or if this course contributes to the curriculum of other departments or programs, please list the affected departments/programs and secure their approvals (e-mailed to the Division Chair) BEFORE submitting this form.)			
	Other Department/Pro	gram	Contribution of the Course to the Other Department/Program (eg. cross-listed course, pre-requisite)	
2)				
3)	Rationale:			
4)		of) courses taugh	eallocation or reduction of instructional staff at by instructional staff and/or administrative staff arse.)	
5)	Submitted by:(Department or Program Chair)			