PILOT COURSE REQUEST

The following course is to be offered on a pilot basis:

Semester: □ Fall □ Spring

Year: __________________

Number of Sections: _____________

Course Prefix/Number: | Course Title: | Credits:

Instructor Name: | Max. Enrollment:

Please indicate day and time of offering (list room only if a special request)

Do you plan on submitting this pilot through governance  YES  or  NO

Rationale for Offering Course:

Course Description (please attach a sample syllabus):

Approved by: ________________________________________________  ________________

Department Chairperson  Date

Reviewed by: ________________________________________________  ________________

Dean of Undergraduate Studies  Date

Approved by: ________________________________________________  ________________

Vice President, Academic Affairs  Date

Revised 9/2009