

For Administrative Use Only <u>PS Course ID #</u>		<h1 style="text-align: center;">Request to Drop a Course</h1> <p style="text-align: center;"><i>(All Sections Below Must be Completed)</i></p>	
College:		Department:	
Date:			
Department Prefix & Course Number:		Course Title <i>(Not to exceed 75 Characters):</i>	
Abbreviated Course Title <i>(not to exceed 25 characters):</i>			
Semester/Term Change Effective:		Faculty responsible for the course:	
Cross Listed Course:	Yes	No	If yes, list other cross listed course numbers: _____ If yes, list original controlling department: _____
Multi-Level Course:	Yes	No	If yes, list other multi-level course numbers: _____ If yes, list original controlling department: _____
What is the rationale for dropping this course?			
Will deletion of this course reduce the total hours in the curriculum? <div style="display: flex; justify-content: space-around;"> Yes No </div> <p style="text-align: center;">If yes, OSRHE Program Modification forms must be submitted along with this form</p>			

1. Sign form using your Abode digital signature.
3. Email to the next college official.
4. The last college official (dean or dean's designee) should select **SUBMIT to APC** which will create an email to the APC secretary
5. SEND

APPROVALS		Type Name Below	Digital Signature	Date
	Dept. Chairperson			Date:
	Professional College Curriculum Review Committee			Date:
	Professional College Dean (or Dean's Designee)			Date:
	Graduate College Curriculum Review			Date:
	Graduate College Dean (or Dean's Designee)			Date:
	Academic Program Council			Date:
	Provost (or Provost's Designee)			Date:

FOR ASSISTANCE COMPLETING THIS FORM OR SUBMISSION, PLEASE CONTACT THE OFFICE OF ADMISSIONS AND RECORDS

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