

Tuskegee University
New Course Approval Signature Sheet

Proposed Course Title: _____
Proposed Course Subject: _____
Proposed Course Number: _____

Approval Signatures

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Chairperson, Department (If Applicable)

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Dean of College/School

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Chairperson, Senate Academic Affairs Committee

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Asst. Provost for Academic Affairs (If Applicable)

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Director of Graduate Studies and Research (If Applicable)

<input type="checkbox"/> Recommend	_____	_____
<input type="checkbox"/> Not Recommend	Date	Provost/Vice President for Academic Affairs (If Applicable)