TRANSMITTAL for UNDERGRADUATE PROGRAMS:
Changes or Proposals

I. INFORMATION:

1. Program Title: TESOL
2. Department(s): English
3. College(s): CAS
5. Check all that apply
   - New program
   - Existing program
   - Change in course name
   - Change in number of credits
   - Change in major
   - Change in minor
   - Change in course content
   - Change in emphasis/option

6. Other Programs/Departments Consulted (Requires letters of comment from all Departments or Programs substantially affected):
   a)
   b)
   c)
   d)

7. Catalog year (and semester) of Implementation: Semester Year

8. Have all courses in this program been approved? Yes ☐ No ☐
   If “No” which courses have not been approved?

9. Attach Request Narrative
   Include in narrative on attached pages a rationale for the requested changes or creation of program. Include clarification concerning any courses that have not yet been approved. If requesting a program change also include a listing of course array for both the current and proposed program?

10. UNIT APPROVALS: Requires signatures of all Department Chairs and Deans whose programs will be substantially affected by the changes or proposal. Signature lines for the affected Departments and Colleges (noted in “6” above), are on the addendum to this form. These signatures should be obtained prior to review by all other shared governance levels.

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>9-26-13</td>
</tr>
<tr>
<td></td>
<td>10/15/13</td>
</tr>
<tr>
<td></td>
<td>10/18/13</td>
</tr>
</tbody>
</table>

*NOTE: The master copy of this transmittal & accompanying documents must be filed in the Provost’s office upon final approval. The Provost’s office will notify all appropriate administrative offices [Registrar, Dean(s), Department Chair(s)] of approvals & necessary actions to implement changes.
TRANSMITTAL for UNDERGRADUATE PROGRAMS: Changes or Proposals - Addendum

Signatures of Additional Department & Colleges Affected

Department Chair: [Signature] Date: 9/30/12
Dean of College: [Signature] Date: 9/30/12

Department Chair: ____________________________
Dean of College: ____________________________

Department Chair: ____________________________
Dean of College: ____________________________

Department Chair: ____________________________
Dean of College: ____________________________