



**Termination of a Course**

**Catalog Title of Course:**

**Name and contact information for future correspondence:**

**Academic Unit – School/College:**

CAS      KSB      SOC      SIS      SPA      SPExS      Other:

**Teaching Unit – Department or Program:**

**Date effective:**

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<b>Required Signatures</b>	<b>Name</b>	<b>Signature</b>	<b>Date</b>
<b>Teaching Unit Chair or Director</b>			
<b>EPC Chair</b>			
<b>Primary Academic Unit Assoc. Dean</b>			
<b>Second Academic Unit Assoc. Dean (if applicable)</b>			

**Date sent to the Office of the University Registrar: \_\_\_\_\_**



## **Termination of a Course**

### **Order of Review**

After approval by the Academic Unit's EPC and Associate Dean (or designee), the proposal must be sent to the Office of the University Registrar via curriculum\_services@american.edu. The Office of the University Registrar may refer the proposal to the Office of the Provost for a more thorough review.

### **Proposal Template**

**Copy and paste the questions below into a new Microsoft Word document and address all questions. Please preserve the formatting (including numbering) to facilitate the review process.**

- I. Identifying Information
  - a) Academic unit
  - b) Teaching unit
  - c) Affected course
  - d) Proposed effective date
  
- II. Rationale
  - a) Please describe the rationale for terminating the course.
  - b) Does this change affect any other academic unit or teaching unit? If so, please include statements from the affected units.
  - c) Does this change affect any faculty or other resources? Please explain.