

General Education Course Removal Form

Please attach this approved GE course removal form along with the appropriate Curriculum Review form.

1. Submitter information (Must be full-time faculty)

First, Mi, Last:

Department Name:

Division Name:



GBC Email:

Contact phone number:

Date of submission:

2. Course information

"Course prefix/ number"

"Course Title"

3. Reason for removal

Other / New number

4. Is this course one of many options for fulfilling GE requirements?

5. Is this course a specific requirement for a program?

Submitter Signature:

Submission Date:

Department Chair Signature:

Approval Date:

If Approved by GE Committee, submitter must attach this document to the appropriate Curriculum Review form. Applicant will receive an explanation in denied.

GEC and Administrative review:

General Education Committee approval/denial:

GEC Chair Signature:

Approval date:

General Education Committee reasoning:

Reminder: Submitter will be contacted with updates and required edits.