

**PROPOSAL FORM
COURSE DELETION**

Current Course Name, Code & Title: _____

Division/Program: _____

Attach current approved course description from the *Guide to Graduate/Undergraduate Programs* (available online on the NSCAD website)

Reason for Proposed Deletion:

Implication for Program (s):

Deletion Proposed By: _____ **Date:** _____

Proposed Implementation Date: _____

Reviewed by Chairperson/Director:	_____
	Signature of Division Chair/Director
Reviewed by Registrar:	_____
	Signature of Registrar
Reviewed by Provost:	_____
	Signature of Provost

Academic Council's Action:

Date: _____