**LAS / GS PLAN OF STUDY CHANGE REQUEST FORM**

This form is to be completed and submitted to the LAS / GS Committee to review any request for changes to be made to the Liberal Arts and Sciences (LAS) or General Studies (GS) Associate Degree Plans of Study. This form is to be submitted with any additional supportive documentation.

Choose from the following:

\_\_\_ LAS AS Degree \_\_\_ GS AS Degree \_\_\_ International / Intercultural

Course Title and Description:

Learning Outcomes and Objectives (including how they align with the TAP) :

Discuss the appropriateness of this course to the LAS / GS degree:

Which elective area(s) do you want this course to be considered for? *Check all that apply*:

|  |  |
| --- | --- |
| **Area Electives** (for current definitions see links from the plan of study) | **How will this course relate to the existing courses?** |
| **LAS – Arts:**  |  |
| **LAS – Social Sciences:**  |  |
| **LAS – Natural Sciences:**  |  |
| **LAS – Advanced LAS:**  |  |
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| **GS – Arts:**  |
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| **GS – Social Sciences** : |

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| **LAS – Natural Sciences:**  |
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| **GS – Advanced LAS:**  |

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Please document how this course transfers to a baccalaureate institution and how it will be used in a four year degree: *Must include how it transfers to any Connecticut State University and / or UCONN and what course it is equivalent to, as well as how it meets the TAP competencies*

Indicate those who have been involved in reviewing this proposal: *This should include individuals from transfer institutions.*

For course changes complete the following section:

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| --- | --- | --- |
| **Current Course Requirement** | **Course Change Proposal** | **Reasoning** |
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Plan of Study Request submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted to LAS / GS Committee: \_\_\_\_\_\_\_\_\_\_\_\_

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After this request is reviewed by the LAS / GS Committee any recommendations will be forwarded to the Curriculum Committee for consideration.

Date of LAS / GS Committee review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date Submitted to Curriculum Date of Curriculum Committee review