

Application for Altering an Approved Proposal

Name: _____

Date: _____

Should the need arise for altering an approved proposal, the applicant must complete this form **and submit a copy of the original application** to the SAC Academic Administrative Secretary (mail station #8C with SAC in the subject line).

Reason for altering an approved proposal:

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Previously Approved Coursework (attach additional sheet if needed):

Institution	Course #	Course Title	Quarter Units	Semester Units	Anticipated Completion Date

Change To (attach additional sheet if needed):

Institution	Course #	Course Title	Quarter Units	Semester Units	Anticipated Completion Date

Signature: _____
Applicant

Date: _____

APPROVALS: (If approval is not given, a separate sheet with reason for disapproval must be attached.)

SAC Chair: _____ Date: _____ Yes No

Academic Senate President: _____ Date: _____ Yes No

Superintendent/President: _____ Date: _____ Yes No