

**WINONA STATE UNIVERSITY  
UNIVERSITY STUDIES APPROVAL FORM**

Routing form for University Studies Course approval.

Course \_\_\_\_\_

<b>Department Recommendation</b> _____ Approved      _____ Disapproved		
_____ Department Chair	_____ Date	_____ e-mail address
<b>Dean's Recommendation</b> _____ Approved      _____ Disapproved*		
_____ Dean of College	_____ Date	
<small>*In the case of a dean's recommendation to disapprove a proposal, a written rationale for the recommendation to disapprove shall be provided to the University Studies Subcommittee.</small>		
<b>USS Recommendation</b> _____ Approved      _____ Disapproved      _____ No recommendation		
_____ University Studies Director	_____ Date	
<b>A2C2 Recommendation</b> _____ Approved      _____ Disapproved		
_____ Chair of A2C2	_____ Date	
<b>Faculty Senate Recommendation</b> _____ Approved      _____ Disapproved		
_____ President of Faculty Senate	_____ Date	
<b>Academic Vice President Recommendation</b> _____ Approved      _____ Disapproved		
_____ Academic Vice President	_____ Date	
<b>Decision of President</b> _____ Approved      _____ Disapproved		
_____ President	_____ Date	
Please forward to Registrar.		
Registrar      _____ Date entered	Please notify department chair via e-mail that curricular change has been recorded.	