

INTEGRATIVE LEARNING CORE COURSE PROPOSAL  
Signature Page

**Primary Course:**

**Instructor/Course Coordinator** proposing the course for ILC:

Signature:

Date:

Name:

**Chair** of the proposing unit/affirming approval by its instructor or appropriate faculty committee:

Signature:

Date:

Name:

**Dean (Associate Dean)** of College or School, affirming support of the proposal:

Signature:

Date:

Name:

**Cross-Listed Course (if applicable):**

**Instructor/Course Coordinator** proposing the course for ILC:

Signature:

Date:

Name:

**Chair** of the proposing unit/affirming approval by its instructor or appropriate faculty committee:

Signature:

Date:

Name:

**Dean (Associate Dean)** of College or School, affirming support of the proposal:

Signature:

Date:

Name:

**To be completed by Faculty Senate Integrative Learning Core Committee**

- Approve as is
- Approve with modification
- Table for Discussion or Modification
- Deny

**Chair, Faculty Senate Integrative Learning Core Committee** (affirming approval by the Committee):

Signature:

Date:

Name:

**Academic Affairs Approval**

Signature:

Date:

Name: