Change in Degree Requirements, Admission Requirements, Addition or Deletion Area of Concentration Requirements, Dept. Grade Requirements/Progression Criteria, Name of Registered Degree or Certificate Program
(All proposals must be Arial font, 12 point)

LEHMAN COLLEGE
OF THE
CITY UNIVERSITY OF NEW YORK

DEPARTMENT OF_____

CURRICULUM CHANGE

Name of Program and Degree Award:
Hegis Number:
Program Code:
Effective Term:

1. **Type of Change:** *(Please indicate change being requested for this program – Change in Degree Requirements, Admission Requirements, Addition or Deletion Area of Concentration Requirements, Dept. Grade Requirements/Progression Criteria, Name of Registered Degree or Certificate Program)*

2. **From:** ~~Strikethrough~~ the changes

3. **To:** <u>Underline</u> the changes

4. **Rationale (Explain how this change will impact learning outcomes of the department and Major/Program):**

5. **Date of departmental approval:**