Proposal for course (s) to be used for the Foreign Language Alternative Program

Date of application: ______________________

Department: ________________________________________________________________

Category: I  II  III  If Category III, Region: ________________________________

Course(s) to be considered: ________________________________________________

Describe how this course (these courses) meet(s) the Student Learning Outcome for the category (limit: 300 words).

Describe one assignment in the/each course in which the learning outcome is assessed, e.g. exam, paper, project.

Have you attached the appropriate syllabus for each/the course? Yes  No

Person submitting this application: ________________________________

Decision.  Approved  Not Approved

Signatures and Date of signature:

General Education Committee Chair:

General Education Coordinator:

Associate Provost:

Speaker of the Faculty Senate: