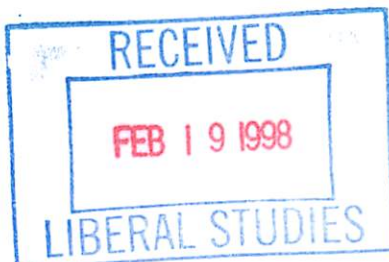


LSC Use Only
Number: _____
Submission Date: _____
Action-Date: _____



UWUCC USE Only
Number: 97-52j
Submission Date: _____
Action-Date: _____

CURRICULUM PROPOSAL COVER SHEET
University-Wide Undergraduate Curriculum Committee

I. CONTACT

Contact Person Dr. B. Gail Wilson Phone 3210
Department Communications Media

II. PROPOSAL TYPE (Check All Appropriate Lines)

COURSE Multi-image Production
Suggested 20 character title

New Course* _____
Course Number and Full Title

Course Revision _____
Course Number and Full Title

Liberal Studies Approval + _____
for new or existing course Course Number and Full Title

Course Deletion CM 478 Multi-image Production
Course Number and Full Title

Number and/or Title Change _____
Old Number and/or Full Old Title

_____ New Number and/or Full New Title

Course or Catalog Description Change _____
Course Number and Full Title

PROGRAM: Major Minor Track

New Program* _____
Program Name

Program Revision* _____
Program Name

Program Deletion* _____
Program Name

Title Change _____
Old Program Name

_____ New Program Name

III. Approvals (signatures and date)

[Signature] 12/15/97
Department Curriculum Committee

[Signature] 2/17/98
College Curriculum Committee

[Signature] 12/15/97
Department Chair

[Signature] 2/17/98
College Dean

[Signature] 2/17/98
Provost

+ Director of Liberal Studies (where applicable)

*Provost (where applicable)