



APPLICATION FOR PRE-APPROVAL OF UNDERGRADUATE COURSE UNITS

DIRECTIONS

This form is for faculty to request pre-approval for an undergraduate course to be used for column movement. Before completing this form, please read Article 20.D of the District/AFT Contract for explanation of process and deadlines.

FACULTY INFORMATION

Name: _____ Employee ID: _____

Department: _____

Educational Background

Your Degree(s): _____

UNDERGRADUATE COURSE INFORMATION

Course Number and Title: _____

College: _____

Check one: Lower Division Upper Division Professional Extension

Units: _____

Expected Class Beginning and Ending Dates: _____

(Note: The course must be completed within four semesters of the VC's approval)

Please explain how this course is relevant to your discipline, assignment, skills, or professional responsibilities. Attach a copy of the catalog description of this course to this application. Attach additional sheets if necessary.

APPROVALS

In processing these requests, recommendations shall be made based on a review of the faculty member's educational background, the content of this course, and the "relevance of this course to the faculty member's discipline, assignment, skills, and professional responsibilities" (Art.20.D CCSF/AFT CBA). Should the recommendation be disapproval, an explanation shall be attached that specifically addresses the aforementioned criteria.

Department Chair

Recommend Approval

Recommend Disapproval (Attach Explanation)

Department Chair Name

Signature

Date

Dean

Recommend Approval

Recommend Disapproval (Attach Explanation)

Dean Name

Signature

Date

Vice Chancellor

Approved

Disapproved (Attach Explanation)

Vice Chancellor Name

Signature

Date