

Certifying Existing Courses for AOK Designations (and CAR Designations)

1. Course Department and Number: _____
2. Official Course Title: _____
3. Approximate Date of Original Approval by Curriculum Committee: _____
4. What Collegiate Requirement(s) did this course fulfill under the “old” curriculum?
(List all that apply.)
Requirement: _____
Requirement: _____
5. What Major/Minor Requirement(s) did this course fulfill under the “old” curriculum?
(List all that apply.)
Major: _____
Major: _____
Minor: _____
Minor: _____

General Education Requirements – New Curriculum

Please check (x) the area(s) that this course will fulfill in the new curriculum.

Applicable Cross-Area Requirements:

- ☐ Capstone Experience
- ☐ Multidisciplinary/Interdisciplinary
- ☐ Computer
- ☐ Non-Western Culture Course
- ☐ Western Culture Course

Experiential:

- ☐ Travel/Study Abroad
- ☐ Internship
- ☐ Research Experience
- ☐ Field Study
- ☐ Student-Teaching

Areas of Knowledge:

Civilizations

- ☐ History
- ☐ Philosophy or Religion

Arts & Literature

- ☐ Arts
- ☐ Literature

Social Science

☐ Discipline specific: _____

Natural & Math Sciences

- ☐ Natural Sciences (☐ with Lab or ☐ without Lab)
- ☐ Mathematics (☐ with Lab or ☐ without Lab)
- ☐ Computer Science (☐ with Lab or ☐ without Lab)
- ☐ Statistics (☐ with Lab or ☐ without Lab)

☐ Foreign Language

☐ Wellness Activity Course

General Education Requirements (continued)

1. For courses satisfying Areas of Knowledge requirements, please explain how this course will meet the goals, learning objectives and criteria of the area(s) you have designated. Consult the goal statements posted by area on the web to complete this section. [Goal Statements by Area](#)

2. For courses satisfying Areas of Knowledge requirements, please briefly how this course will be speaking and/or writing attentive.

List the general education requirement(s) and secure the appropriate department chair/program director's signature:

Requirement: _____	Signature: _____
Requirement: _____	Signature: _____
Requirement: _____	Signature: _____

Signature: _____

Chair's Signature: _____

Date Submitted: _____