

**LOUISIANA STATE UNIVERSITY AT ALEXANDRIA  
CURRICULUM REQUEST**

<input type="checkbox"/> Add New Curriculum  <input type="checkbox"/> Change Existing Curriculum
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Department \_\_\_\_\_ College \_\_\_\_\_ Date \_\_\_\_\_

Name of Curriculum \_\_\_\_\_  
 (If existing curriculum, list name currently used. Page(s) \_\_\_\_\_ of the \_\_\_\_\_ catalog.)

Change name of current curriculum? Yes ( ) No ( ) If yes, list name of new curriculum.  
 \_\_\_\_\_

Change to be effective \_\_\_\_\_  
 Semester / Year

List on the left side of the form that part of the present description that may be affected by the proposed change; list the proposed change on the right side of the form.

(Present)	(Proposed)

