UNIVERSITY OF NEW ORLEANS

RE-ACTIVATION FORM

For courses that were inactivated for not being offered in more than 5 years, can be re-activated by the use of this form.

The re-activation will be granted after appropriate justification and approval of the Chair and Dean of the College. The course will be re-activated in its original forma nd no changes should be made to it via this form.

Please note that this form can only be used for re-activating courses inactivated due to the above reason and not for any other course deleted with UCCC/Graduate Council approval (the department is responsible for submitting the Add Drop Change Course proposal form to UCCC for this).

CIP:		
Department:	**College**:	**Date**:
Department Prefix:	**Course Number**:	**Credit Hours**:
Semester Requested: ☐ Fall ☐ Spring ☐ Summer		
Course Title: English Composition Supplemental Support		
Title Abbreviation: (Include spaces)		

Justification

Justification for re-activating course. Attach a copy of the course syllabus.

Endorsements/Approvals

Department Chair _____ Date _____ College Dean _____ Date _____

Provost _____ Date _____

Submit one signed copy to the Office of Academic Affairs and one electronic copy to uccc@uno.edu.

Effective date 9/4/15