

CATALOG CHANGE SUBMISSION FORM

	Date:	
	Catalog Year: 2025	-2026
Change Type: (check one)	Insertion Deletion Relocation Chan	ge Other
Change Scope: (check one)	Single Change Global Change Other	
Name of Catalog Se	ction:	
Text of Modification	1:	
Change Initiated By:	Name/ Title	 Date
	Name, Title	Date
Change Approved:		
	Administrative Authorization*	Date
	*Administrator Responsible for the section: VCAA, AVCSA,	
	College Registrar, Director, Curriculum and Program	
	Development or as designated	
	Assistant Vice Chancellor for Human Resources**	Date
	**For verification of new positions and title changes	
	Senior Level Authorization***	
	***Vice Chancellor, Academic Dean, or Primary Report Head	Date
	vice chancenor, Academic Dean, or Frinary Report Head	
	Editor	————— Date