

CATALOG CHANGE SUBMISSION FORM

	Date:	
	Catalog Year: 2026	-2027
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:		
g	Name/ Title	Date
	•	
Change Approved:		
	Administrative Authorization*	Date
	*Administrator Responsible for the section: VCAA, AVCSA,	2410
	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***	Date
	***Vice Chancellor, Academic Dean, or Primary Report Head	
	Editor	 Date