UNDERGRADUATE COURSE DELETION PETITION

1. Course Title: Racquetball

2. Course Description: No course description in catalog

3. Last Semester and year the course will be offered (check only one):
   □ Fall  □ Spring  □ Summer I  □ Summer II  □ Summer III  2013
   Year

4. Attach rationale for the course deletion.

5. Department faculty signatures (majority required). If an interdisciplinary program, a majority of each department must sign this form. Number of Faculty in Dept(s) ___
   [Signatures]
   Department Chair

6. Sent to Chair, College Curriculum Committee: Date: 2/20

7. Received by Chair, College Curriculum Committee: Date: 2/20
   Approved  □  Not Approved  □
   Signature: ____________________________
   Chair of Committee Date: 2/20

8. Sent to the Dean of the College of Date: 2/20
   Approved  □  Not Approved  □
   Signature: ____________________________
   Dean of College Date: 2/20

9. Sent to Provost Office. (Original plus an electronic copy to Michele Duran at mlduran@usi.edu) Date: 2/21

10. Received in Provost Office: Date: 2/22/2013
11. Notified Chair of Curriculum Committee: Date: _________

12. Curriculum Committee Meeting date to discuss petition: Date: _________

13. Curriculum Committee Meeting date published in USI Today: Date: _________

14. Received by Chair of Curriculum Committee: Date: _________
   Approved ☐ Not Approved ☐
   Signature: ____________________________ Date: _________
   Chair of Curriculum Committee

15. Sent to Provost: Date: _________

16. Received by Provost: Date: _________
   Approved ☐ Not Approved ☐
   Signature: ____________________________ Date: _________
   Provost

17. Notice of approval by Provost for publication in USI Today: Date: _________

18. Notified Registrar, Core Curriculum Coordinator, and Teacher Certification and Licensing Director of final approval: Date: _________
Rationale for Course Deletion

This course has not been offered in the last decade and we do not have any of the equipment and/or venue to offer it.