UNDERGRADUATE COURSE DELETION PETITION

1. Course Title: Social Recreation

2. Course Description: No catalog description

3. Last Semester and year the course will be offered (check only one):
   - [ ] Fall
   - [X] 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) 9

   [Signatures]

   [Signature] Department Chair

6. Sent to Chair, College Curriculum Committee:
   - Date: __________

7. Received by Chair, College Curriculum Committee:
   - Approved [ ] Not Approved [ ]
   - Signature: ____________
   - Date: __________

8. Sent to the Dean of the College of ____________
   - Approved [ ] Not Approved [ ]
   - Signature: ____________
   - Date: __________

9. Sent to Provost Office.
   (Original plus an electronic copy to Michele Duran at miduran@usi.edu)
   - Date: __________

10. Received in Provost Office:
    - Date: __________
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:  
   Approved ☐ Not Approved ☐  
   Signature: ____________________________  
   Chair of Curriculum Committee  
   Date: 

15. Sent to Provost:  
   Date: 

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

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 is not a part of any curriculum within the Department of Kinesiology and Sport.