Name: _____   **Date**: _____

Department/committee/group:_____

COCC Contact Information: _____

E-mail your completed presentation checklist to the Faculty Senate chair by his or her specified deadline.

PROPOSAL OVERVIEW   (add extra pages if needed)

TYPE OF AGENDA ITEM

Information Item (update on projects)

Action Item

    Evaluation, Promotion, Tenure
    Professional Development (PIP, sabbatical, travel, workshops...)
    Recommend procedure change by another committee or individual that does not require change to GP Manual

 Feedback request (for ultimate decision by another committee or individual)

    Calendar and workload (scheduling, office hours, online,...)

    Course/program assessment (assessments, APR...)

    Other: _____

Policy or Procedure change that requires change to GP Manual (will require approval by College Affairs or Academic Affairs)

    Other:_____