BOROUGH OF MANHATTAN COMMUNITY COLLEGE
The City University of New York

Curriculum Proposal

CURRICULUM REVISION

Attach a copy of the new and old curricula to this sheet as well as any new course or course revisions required as part of this curriculum revision. Use a two column format comparing the old and new curricula.

1. Name of Department: Science
2. Name of old curriculum: Science for Health Professions
3. Name of new curriculum: Science for Health
4. Degree to be granted: A.S. Degree in Science
5. Semester curriculum revision will first be effective: Spring 2021
6. Estimated enrollment in curriculum (number of students estimated to begin this curriculum per academic year): _____
7. Will this curriculum revision require special materials, equipment or space that were not required for the old curriculum? ___☐___ Yes ___☑___ No If yes, attach an explanation.
8. Number of new courses: None
   None/None (moved to new requirement location)
9. Number of old courses being dropped: _____
10. Number of course revisions required as part of this revision: None

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Signatures

1. _____ 8/27/20
   Department Chairperson or Program Director — Date
2. Alam _____ 8/27/2020
   Scheduling Officer (Advised as to Course Code) — Date
3. Erwin J. Wong Digitally signed by Erwin J. Wong Date: 2020.10.01 12:50:55 -04'00' _____ _____
   Dean of Academic Affairs (Advised as to format) — Date
4. _____ 11/4/20
   Chairperson of Curriculum Committee — Date