

The Denison Off-Campus Study Proposal Course Evaluation Form

STUDENT:

Complete the top of this form and then drop it off at the appropriate department/program office.

Date: _____

Name: _____ Email: _____

Major(s): _____ Minor(s): _____ Concentration _____

OCS Program: _____ Term (circle one): Sum Fall Spr AY

Course #	Course Name	Credit Hours
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Web link to syllabus (if a web-based copy is not available, you *must* attach a paper copy of the syllabus):

Proposed use at Denison (circle one): Major Minor Concentration Gen Ed Elective

CHAIR/DIRECTOR:

It is not necessary to meet with the student to complete this form. However, if you require further information about the course or wish to discuss concerns regarding the proposed use of the course, you should feel free to contact the student.

--> Please return this form to the student within two weeks <--

_____ I approve the transfer of this OCS course according to the following guidelines:

- Use (circle one): Major Minor Concentration Gen Ed Elective
- Level (circle one): 199 299 399
- Other: _____

_____ I do not approve the transfer of this OCS course.

Reason:

Signature of Chair/Director

Department/Program

Date