ESF Course Deactivation
Committee on Curriculum - ESF Faculty Governance
Office of Instruction & Graduate Studies

This course deactivation request form should be completed when a course will no longer be offered. The request will be reviewed by the Committee on Curriculum and, if approved, the course will be deactivated in the Course Database and removed from the College Catalog.

Date: March 13, 2023

1. Course Information:

1.1 Course Prefix and Number: LSA 606
   Course Title: History of Landscape Architecture II

1.2 Reason for deactivation:

(Please check all that apply)

☐ Replaced by new course/course number/prefix

☐ Lack of enrollment

☒ Curriculum change

☐ Faculty retired/left ESF

☐ Other:

2. Course Deactivation Date: Fall 2024

3. Affected Academic Department(s) or Program(s) – other than the sponsoring department:

____________________________________________________ ___________________________
Department/Program 1  Name of Chair/Program Director  Or letter attached ☐
Chair Signature  Date

____________________________________________________ ___________________________
Department/Program 2  Name of Chair/Program Director  Or letter attached ☐
Chair Signature  Date

____________________________________________________ ___________________________
Department/Program 3  Name of Chair/Program Director  Or letter attached ☐
Chair Signature  Date

[if more than three Departments/Programs, please continue on a separate page]
Other Units:

__________________________________________________ Or letter attached □
Associate Provost for Instruction & Dean of the Graduate School Date
(for General Education courses only)
__________________________________________________ Or letter attached □
Registrar Date

4. Proposer Information and Sponsoring Department Chair Affirmation:

Contact Person:
Name: Margaret Bryant Department: Landscape Architecture
Email: mbryant@esf.edu Phone: 4929

This proposal for course deactivation has been reviewed and approved by the sponsoring Department. Affected departments have been notified and given the opportunity to provide feedback.

Name: Margaret Bryant Date: 3-13-2023
Department Chair (or designated curriculum representative)
Signature: __________________________ Or letter attached
Department Chair (or designated curriculum representative)

5. Approvals:

________________________________________ Date
Curriculum Committee

________________________________________ Date
Faculty Governance

________________________________________ Date
Provost