*Withdrawal of courses, or minors*

*(All proposals must be Arial font, 12 point)*

**LEHMAN COLLEGE**

**OF THE**

**CITY UNIVERSITY OF NEW YORK**

**DEPARTMENT OF\_\_\_\_\_\_\_\_\_**

**CURRICULUM CHANGE**

1. **Type of Change:**  (*Please indicate type of withdrawal that is being requested - Withdrawal of courses or minors)*

2. **Description:**

3. **Rationale (Explain why this course/program is no longer needed in the Department):**

4. **Date of departmental approval:**