

## Returning Learning Community (RLC) DEPARTMENTAL ACTION REQUIRED

**Instructions:** This form is used to seek permission from department chairs and, if appropriate, associate deans for their faculty to teach in learning communities that have been taught in previous semesters.

TO DEPARTMENT CHAIR (Requestor, please list all department chairs from whom permission is needed):	
REQUESTED SEMESTER (Requestor, please list th	he semester and year of the RLC):
NAME OF LC (Requestor, please list the name of the	RLC):
<b>DESCRIPTION OF LC</b> (Requestor, please provide a (i	n updated) description of the RLC):
	, , , ,
COURSES/INSTRUCTORS/CRNs (Requestor, please	e list the course number of each course in the RLC (e.g., CWP
	osed CRN if known; department chair, please add to or change
the instructor and CRN information below as desired)  1.	<i>:</i>
2.	
3.	
4.	
Fo	r Office USE
i	<del></del>
By signing below, I approve or deny my unit's pa	articipation in the RLC described above.
Approved	
Denied	
Date Signature of CHAIRS	Signature of Associate DEANS
3.3	(if applicable)
Date	Signature of Academic Transition Programs office