

# Chiron Studies

## COURSE PROPOSAL APPROVAL SHEET

345 CH (503) 725-2998

---

### SECTION 1: CHIRON COURSE INFORMATION

---

COURSE TITLE

| DEPARTMENT <sup>1</sup> | COURSE # | TERM | YEAR | CREDITS | GRADING METHOD  |
|-------------------------|----------|------|------|---------|---|
| IST                     |          |      |      | 4       | <input type="checkbox"/> P/NP OR A-F<br><input type="checkbox"/> A-F ONLY |

---

### SECTION 2: INSTRUCTOR INFORMATION

---

|         |             |          |
|---------|-------------|----------|
| NAME    | TELEPHONE   | EMAIL    |
|         |             |          |
| ADDRESS | CITY, STATE | ZIP CODE |
|         |             |          |

---

### SECTION 3: DEPARTMENTAL APPROVAL

---

|                 |                    |      |
|-----------------|--------------------|------|
| INSTRUCTOR      | APPROVAL SIGNATURE | DATE |
|                 |                    |      |
| FACULTY SPONSOR | APPROVAL SIGNATURE | DATE |
|                 |                    |      |

---

### SECTION 4: MULTIPLE LISTING PRE-APPROVAL<sup>2</sup>

---

|                     |                    |      |
|---------------------|--------------------|------|
| DEPARTMENT CHAIR    | APPROVAL SIGNATURE | DATE |
|                     |                    |      |
| DEPARTMENT NAME     |                    |      |
| DEPARTMENT CHAIR II | APPROVAL SIGNATURE | DATE |
|                     |                    |      |
| DEPARTMENT NAME II  |                    |      |

<sup>1</sup> IST is the course prefix for all Chiron courses. IST is the code for Interdisciplinary Studies.

<sup>2</sup> Multiple Listing allows classes from our department (IST) to be listed under another department heading in the Schedule of Classes. This listing is in addition to (it does not replace) the normal class heading of IST. Pre-approval by the hosting department often makes the completion of the ML form (which cannot be completed until you have a CRN) easier. Multiple Listing is one of the many successful ways that instructors are able to advertise for their class.

# Chiron Studies

## FACULTY SPONSOR AGREEMENT

345 CH (503) 725-2998

I have reviewed and approved the Chiron Studies course proposal for:

Course Title:

Instructor:

Term:  Year:

- I agree to supervise the academic quality of the course content.
- I agree to act as a mentor to the Chiron instructor. This may take the form of weekly meetings, email correspondence, or various forms of “check-ins.”
- I agree to print the roster from the system for the Chiron instructor.
- I agree to be the Professor of Record by submitting the grading forms or submitting the grades for this course.
- I agree to evaluate the course and the instructor at the request of the Chiron Studies Committee or Chiron Coordinator.
- In the event that a Chiron Instructor is unable to complete his or her Chiron course I agree to facilitate – with the help of the Chiron Committee – finding a replacement as soon as reasonably possible.

Name:

Signature:

Department:

Telephone:

Email: