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That the following COURSE ADDITION be approved:

NUR 317

(Course change forms are available for inspection in the Faculty Senate office.)

FACULTY SENATE PRESIDENT:

APPROVED zik _____DATE: 3 21 91 BY SENATE:.. DISAPPROVED BY SENATE: __DATE:_____

UNIVERSITY PRESIDENT:

APPROVED:	Gen Full	DATE: <u>4/57</u> 27
DISAPPROVED:		DATE:

COMMENTS:

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