ILSP Revision Approval Form

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| Tenure-track faculty member |  |
| College | **Choose an item.** |
| Date | **Wednesday, March 11, 2015** |

This form is only completed if there are significant changes (additions, subtractions, or revisions) to one or more ILSP outcome. (Note that changes to the timelines for outcomes are to be expected, and do not require this form.)

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| Description and Explanation of Changes  |
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# Signatures

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| TAP Leader | Signature | Date Signed |
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| Administrative Designee | Signature | Date Signed |
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| Department Chair | Signature | Date Signed |
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| Tenure-track Faculty Member | Signature | Date Signed |
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