

## Yarmouk University Faculty of Sciences Department of XXX

## **Department Actions**

Course number/ name:		
Meeting #:		Date:

## Department Council action plan

#	Action	Dep. decision
1		Dep. decision Accept/Reject
2		
3		
4		
5		

## Recommendations for the course:

#	Recommendations
1	
2	
3	
4	
5	