



G R O S S M O N T C O L L E G E

College Council Recommendation Form

Return Recommendation Form to the recorder (Patty.Sparks@gcccd.edu). [College Council](#) meets every third Thursday of the month from 3:00 to 5:00 p.m.

Please submit this form by the second Thursday of each month to allow review time and to add to the agenda. Please allow a two-month window for all requests for discussion and further action.

Recommendation Guidelines: This form should be submitted, along with relevant supporting materials, to Patty Sparks upon the completion of committee work - for consideration at the College Council. The proposal will be agendaized and information regarding the day and time of the scheduled discussion will be made available to the chair of the submitting body. This form documents both the request and the action taken by the council and may be considered as a formal record of the process.

Contact Information:

Committee Making the Request:

Title of Request:

Date of Request:

Required by Date if Any & Why:

(Ex. Grant Proposal Deadline Date)

Chair / Co-Chair Contact name:

Phone/Extension:

Email Address:

Summary of Recommendation/Request: Briefly describe the nature of the request that will be presented and discussed in the meeting. You may also attach and refer to relevant documents which contain more detail - such as a prioritized list, a plan, or a report.

Value to College: As the College Council is a recommending body to the College President, please note the proposed outcome/recommendation you will be seeking from the Council. Please note and explain any specific relationship of this work to the [Grossmont Mission](#), [Strategic Plan Goals](#), the [Equity Plan](#), and/or other formally noted priorities or mandates.

Committee(s) Consulted & Their Response(s): If this proposal includes any work done in collaboration with another committee - or was consulted with other bodies before coming to College Council, please note those bodies and the nature of their involvement in the process.

Estimated cost if known or applicable:

Source of Funding:

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FOR COLLEGE COUNCIL TO COMPLETE:

College Council Recommendation:

Approved

Not Approved

Refer to:

College Council Feedback (Rationale for approval/non-approval or purpose of referral)