PROGRAM CHANGE FORM (Updated September 2019)

1. Submitted by: Click here to enter text.

 Name of Institution

2. Type of Program Change (Check all that apply)

[ ]  Degree title change only

[ ]  Change degree program modality

[ ]  Combination program created out of closely allied existing programs

[ ]  Option(s) added to existing program(s)

[ ]  Change name of option(s)

[ ]  Addition of certificate program developed from approved existing parent degree

[ ]  Addition of free-standing single-semester certificate program (available to all students)

[ ]  Delete program(s)

[ ]  Delete option(s)

[ ]  Place program on “Inactive Status” list

|  |  |
| --- | --- |
| **Before the Proposed Change** | **After the Proposed Change** |
| Title of Old Program/Certificate | Degree | CIP Code | Title of New Program/Certificate | Degree | CIP Code |
| Click here to enter text | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

|  |  |
| --- | --- |
| **Modality / Modalities Before Proposed Change** | **Modality / Modalities After Proposed Change** |
| [ ]  Classroom[ ]  Online[ ]  Hybrid[ ]  Competency-based | [ ]  Classroom[ ]  Online[ ]  Hybrid[ ]  Competency-based |

4. Attach a copy of “before and after” curriculum, as applicable, and a rationale for the proposed change.

5. If an ***undergraduate*** certificate proposal, please indicate whether the certificate is intended to be completable in [ ]  a single semester (C0); [ ]  one year (C1); [ ]  two years (C2).

6. Intended date of changes to be effective (Month/Year): Click here to enter text.

**AUTHORIZATION**

Click here to enter text. DATE

Name/Title of Institutional Officer Signature Date

Person to Contact for More Information Telephone Number