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