

REQUEST FOR APPROVAL OF
A SUBDIVISION* OF A DEGREE OR DEGREE PROGRAM NAME CHANGE
(Use this as a guide and attach complete documentation.)

1. Institution:
2. Responsible Department/School or Administrative Unit:
3. Proposed Program Title:
4. Previous Program Title (if applicable):
5. CIPS Classification (if applicable):
6. Proposed Date of Initiation:
7. Description of Proposed Program or Name Change:
8. Rationale for Proposal:
9. Expected Impact of Proposal on Existing Campus Programs:
10. Curricular Change Including New Courses:
11. Anticipated Staffing Arrangements:
12. Anticipated Funding Needs and Source of Funds:

*e.g. Sequence

DEGREE PROGRAM/SEQUENCE/CERTIFICATE DELETION REQUEST
(Use this as a guide and attach complete documentation.)

1. Institution:
2. Responsible Department/School or Administrative Unit:
3. Program Title:
4. CIPS Classification (if applicable):
5. Proposed Date of Initiation:
6. Rationale:
7. Arrangements to be Made for Program Faculty and Students:
8. Anticipated Impact on Other Campus Programs:
9. Anticipated Budgetary Effect: