**Instructions for completion:**

1. **Complete Part A: Overview**
2. **For each degree and certificate in the program, complete Part B: Proposed Degree Sequence (See separate Part B document)**
3. **Complete Part C: Proposed Catalog Entry (see separate Part C document)**
4. **Complete Part D: Signatures**
5. **Submit completed Parts A-D to the Office of Instruction**

**PART A: OVERVIEW**

|  |  |
| --- | --- |
| **Your Name and Title:** | .Enter your name and title here. |
| **Title of Proposed New Program** | Enter Program title here.. |

**Proposal Summary** – Please include:

* Rationale for new Program
* The impact on other programs or areas
* Personnel, facility, and budgetary implications
* The course numbers of courses affected
* Any credit changes

|  |
| --- |
| Click or tap here to enter text |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**Please affirm that you have discussed the proposed new program and changes with:**

* Department chair/director
* Applicable deans at all campuses
* Registrar
* Vice President of Instruction
* Financial Aid
* Veterans’ Services

**PART D: SIGNATURES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Signatures:** |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Chair/Director: | | Date: | |
|
| Dean: | | Date: | |
|
| Registrar: | | Date: | |
|
| Curriculum Council Reviewer: | Vote Results: | | Date: |
| Curriculum Council Chair: | | Date: | |
|