**Instructions for completion:**

1. **Complete Part A: Overview**
2. **For each degree and certificate in the program, complete Part B: Proposed Degree Revisions (See separate Part B document)**
3. **Complete Part C: Proposed Catalog Revisions (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 Program**  | Enter Program title here.. |

**Proposal Summary** – Please include:

* Rationale for Program changes
* 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 these proposed 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:  |
|