To Propose a New Degree Program (Bachelor, Masters, or Doctorate)

New Program Name: ____________________________

Lead Sponsor: ____________________________ Email: __________

Type of Degree: ____________________________ Date of BOT Preliminary Approval: ____________________________

Department: ____________________________ College: ____________________________

Interdisciplinary □ No □ Intra-College □ Inter-College

DEPARTMENT AND DEAN APPROVAL (Signatures Required for Submission to University Senate Office):

Dept. Chair: ____________________________ Date: __________

Dept. Curriculum Chair: ____________________________ Date: __________

Academic DEAN: ____________________________ Date: __________

Academic DEAN (Interdisciplinary): ____________________________ Date: __________

COLLEGE CC APPROVAL: Open Hearing Date: __________ □ Approved □ Not Approved

Signature College Curriculum Chair: ____________________________ Date: __________

SENATE CC APPROVAL:

Committee Open Hearing Date: __________ □ Approved □ Not Approved

Full Senate Vote Date: __________ □ Approved □ Not Approved

Signature Senate Curriculum Chair: ____________________________ Date: __________

Comments: ____________________________________________

________________________________________________________________________

PROVOST APPROVAL: □ Approved □ Not Approved

Provost Signature: ____________________________ Date: __________

BOT and STATE APPROVALS:

AA Subcommittee Date: __________ BOT Approval Date: __________ State Approval Date: __________

REGISTRAR ACKNOWLEDGEMENT:

Registrar Signature: ____________________________ Date: __________

PROVOST OFFICE TRANSMITTAL NOTIFICATION:

Date: __________ Signature: ____________________________