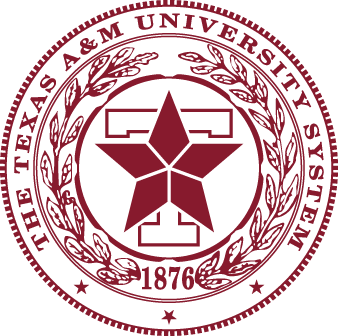
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**Revision of Program**

**Request Form**

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| Directions: An institution shall use this form to propose the modification of a degree. All sections should be completed unless noted otherwise.  *“Modification (Revision) of an authorized degree title requires Coordinating Board approval before it may be publicized.  Minor modifications (revisions) which do not alter the content or nature of degree programs may be approved by Coordinating Board staff upon application from an institution.”*  Information: Contact the System Office of Academic Affairs at 979-458-6072 for more information. |

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| **Administrative Information**   1. Institution –   2. Description – Describe the program revision requested.  3. Rational for Modification – Explain the reason for the revision.  4. Program Inventory – Show how the revision would appear on the Coordinating Board’s Program Inventory. Include all degree programs and corresponding Texas CIP codes affected by the change but do not include proposed administrative unit codes for the new academic unit(s).  5. Summarize implications for classes, distribution of personnel, availability of facilities, and availability of equipment.  6. Give information regarding any additional costs or savings.  7. Proposed Implementation Date – Report the date that the change would go into effect.  8. Contact Person – Provide contact information for the person who can answer specific questions about the program revision.  Name:  Title:  Email:  Telephone: |

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| **Signature Page**  I understand that the Coordinating Board will update the program inventory of the institution to reflect the program degree revision, if no objections to the proposed revision is received during the 30-day public comment period.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chief Executive Officer Date   1. TAMUS Office of Academic Affairs Approval   *On behalf of the A&M System, I certify that the Office of Academic Affairs has approved the program degree modification.*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  James R. Hallmark, Ph.D.  Vice Chancellor of Academic Affairs Date |

1. **Impact**

A. Role and Mission – Describe how the revision would affect the role and mission of the institution.

B. Program Support and Development

1. Describe how the revision would affect existing degree programs and plans for new degree programs.
2. Indicate how many students and faculty there would be in the proposed administrative unit, by level and by degree program.
3. Describe how the proposed administrative unit would compare to existing administrative units at the same level (e.g., department, college, school, etc.) in terms of cost and number of students and faculty supported.

C. Accreditation – Explain how the change would affect accreditation or re-accreditation.

D. Resources – Describe how the change would affect resources (e.g., number of employees, salaries of key administrators and faculty, the course inventory, facilities, and equipment) for the next five years.

1. **Costs and Funding**

Five-year Costs and Funding Sources – Use this table to show five-year costs and sources of funding for the change. (New five-year costs that equal or exceed $2 million must be approved by the Coordinating Board at one of its quarterly meetings.)

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| **Five-Year Costs** | | **Five-Year Funding** | |
| Personnel 1 | $0 | Reallocated Funds3 | $0 |
| Facilities and Equipment | $0 | Anticipated New Formula Funding4 | $0 |
| Library, Supplies, and Materials | $0 | Special Item Funding | $0 |
| Other 2 | $0 | Other 5 | $0 |
| **Total Costs** | **$0** | **Total Funding** | **$0** |

1. Report costs for new administrative positions and new support staff. For new faculty, prorate individual salaries as a percentage of the time assigned to administer the new academic unit and any new programs under that unit. If existing faculty and support staff will be reassigned to administer the academic unit, include personnel costs necessary to maintain existing administrative efforts and existing programs. (e.g., costs of adjuncts to cover courses previously taught by faculty who would now administer a new academic unit.)

1. Report other administrative costs here (e.g., new accreditation costs, travel directly related

to administrative unit.)

1. If existing funding would be used to support the new administrative unit, indicate the funding sources and how the reallocation of funds would affect existing administrative units and programs.

4. Not generally applicable to administrative change requests. Show formula funding for students new to the

institution in tables of costs and funding for new degree programs.

5. Report other sources of funding such as debt service, gifts, in-hand grants, and likely future grants that would directly support the new administrative unit.

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| **Signature Page**  1. Adequacy of Funding – The chief executive officer shall sign the following statement:  *I certify that the institution has adequate funds to complete the administrative change and to support any new or reorganized academic unit(s). Furthermore, the change will not reduce the effectiveness or quality of existing programs, departments, schools, or colleges*.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chief Executive Officer Date   1. System Office of Academic Affairs Approval   *On behalf of the A&M System, I certify that the Office of Academic Affairs has approved the administrative unit.*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Frank B. Ashley III  Vice Chancellor of Academic Affairs Date |