**Notification Form for Administrative Changes**

**Texas Higher Education Coordinating Board**

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| Directions: An institution shall use this form to notify the Board of an administrative change.  Information: Contact the Division of Workforce, Academic Affairs and Research at 512/427-6200 for more information. |

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| **Administrative Information**  1. Institution: Texas A&M University |
| 2. Description of Administrative Change: (*e.g., create a new Department of Sociology; merge existing College of Science and College of Liberals Arts into a new College of Arts and Science, etc.)* |
| 3. Degree Program Inventory: *Show how the change 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). Board staff will assign the new administrative unit codes.* |
| 1. Implementation Date: *(MM/DD/YY)*      1. Phase Out Date (if applicable): *(MM/DD/YY)* |
| 6. Contact Person: Provide contact information for the person who can answer specific questions about the program.  Name:  Title:  E-mail:  Phone: |

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| **Signature Page**  Institutional Approval:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *Chief Academic Officer (name)* Date  *Title*  Texas A&M University System Approval:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  James R. Hallmark Date  Vice Chancellor for Academic Affairs  Texas A&M University System |