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| --- | --- | --- |
| **College:** | Choose an item. | |
| **Department/School:** | Choose an item. | |
| **Person Submitting Initial Request:** | Click or tap here to enter name. | |
| **Effective Catalog Year: (e.g.: 2023-2024)** | Click or tap here to enter text. | |
| **Program Name:** | Click or tap here to enter text. | |
| **Major Code:** | Click or tap here. | |
| **CIP Code:** | Enter CIP code, if available. | |
| **Total semester credit hours (SCH) for program:  (e.g.: 120, 30-36, etc.)** | Click or tap here to enter text. | |
| **What percentage of modality (online or face-to-face) will the entire degree be offered to students. Provide additional comments, if necessary.**  (check all that apply) | 100%  86-99%  51-85%  Face-to-Face  Click or tap here to enter text. |  | |
| **Important notes:**   * **Once the ‘New Program Request’ has been approved by the University Curriculum Committee and Provost, please contact Academic Digital Marketing (ADM) to update any college or department websites.** | | |
| **Program Description** | | |
| Click or tap here to enter text. | | |
| **SACSCOC Substantive Change**  Explain why this is or is not a substantive change requiring notification or approval by SACSCOC.  (see [*Substantive Change Information/Checklist*](https://wtaccess.wtamu.edu/files/forms/aa/SACSCOC-Substantive-Change-Checklist_062020.pdf) *on WTAccess or the Academic Affairs webpage*) | | |
| Click or tap here to enter text. | | |
| **Program Course Work**  List program courses; include prefix/number/title for *existing* courses. **For *proposed new courses*, also include course descriptions.** Upon notification of program approval by the A&M System and THECB, submit *New Course Request(s)* for the new courses. | | |
| Click or tap here to enter text. | | |
| **Explanation/Justification**  Provide a brief explanation of this request and specify assessment findings (learning and/or strategic) that support the need for this request. | | |
| Click or tap here to enter text. | | |
| **Student-Learning Outcomes**  Identify and list *measurable* student-learning outcomes for the proposed program. | | |
| Click or tap here to enter text. | | |
| **Other Department(s) Affected by this Request**  Confirm contact of and approval by other departments. | | |
| Click or tap here to enter text. | | |
| **Implications to Budget**  Describe additional personnel (faculty/staff), space, equipment/supplies, library, and IT needs as appropriate. | | |
| Click or tap here to enter text. | | |