|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **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. | | | | | |
| **First Semester Change will be Offered:  (e.g.: Fall 2023, Spring 2024,  Sum1 2024, etc.)** | Click or tap here to enter text. | | | | | |
| **Program Name:** | Click or tap here to enter text. | | | | | |
| **Major Code:** | Click or tap here. | | | | | |
| **Total semester credit hours (SCH) for program:  (e.g.: 120, 30-36, etc.)** | Click or tap here to enter text. | | | | | |
| **Type of Change:**  (check all that apply) | Univ Core | College | Dept | Major | Other | |
| **What percentage of modality (online or face-to-face) will the entire degree be offered to students (including the new changes)? 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:**   * **If a program is actually being consolidated with another program, please complete a ‘Program Deactivation Request’ on the program being consolidated and a ‘Program Change Form’ on the persisting program that explains how the programs will be consolidated.** * **Once the ‘Program Deactivation Request’ and ‘Program Change Request’ have been approved by the University Curriculum Committee and Provost, please contact Academic Digital Marketing (ADM) to update any college or department websites.** | | | | | | |
| **SACSCOC Substantive Change**  Explain why this is or is not a substantive change requiring notification or approval by SACSCOC? (see *Substantive Change Information/Checklist on WTAccess or the Academic Affairs webpage*) | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **Explanation/Justification**  Provide a brief explanation of the requested change and specify assessment findings (learning and/or strategic) that support the need for this request. | | | | | | |
| Click or tap here to enter text. | | | | | | |
| **Catalog Link**  Copy the program link from the current catalog. | | | | | | |
| Copy catalog link here. | | | | | | |
| **Change From/To**  Copy current program from the catalog (not from the program website); indicate changes by using ~~strikethrough~~ for deletions and red font for additions. | | | | | | |
| 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. | | | | | | |