

**ACADEMIC PROGRAM PROPOSAL FORM**

**(*Revised: January 2021)***

**DIRECTIONS**: *Use this form when proposing a new major or primary field of study, new emphasis (BAS only), or new degree or certificate (30+credits) program.* ***For more detail on the NSHE program approval process, see the last page of this form.***

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| ***Date of AAC Approval:***      |

**DATE SUBMITTED:**

**INSTITUTION:**

|  |
| --- |
| ***Date of Board Approval:***      |

**REQUEST TYPE:** [ ]  New Degree

 **[ ]** New Major or Primary Field of Study

 [ ]  New Emphasis (BAS only)

**DEGREE: Check applicable box**

[ ]  Certificate: 30+ Credits [ ] Associate of Arts (AA)

[ ]  Associate of Science (AS) [ ] AA/AS

[ ]  Associate of Applied Science (AAS) [ ] Bachelor of Applied Science (BAS)

[ ]  Bachelor of Arts (BA) [ ] Bachelor of Science (BS)

[ ]  Master of Science (MS) [ ] Master of Arts (MA)

[ ]  Doctor of Philosophy (Ph.D.) [ ] Other or Named Degree:

**MAJOR OR PRIMARY FIELD OF STUDY** (i.e. Animal Science):

**INCLUDED IN THE NSHE PLANNING REPORT:** [ ]  Yes **[ ]** No

**(Website for NSHE Planning Reports:** [**https://nshe.nevada.edu/administration/academic-student-affairs/reporting/planning/**](https://nshe.nevada.edu/administration/academic-student-affairs/reporting/planning/)

**TOTAL NUMBER OF CREDITS TO PROGRAM COMPLETION:**

**PROPOSED SEMESTER/TERM OF IMPLEMENTATION:**

**Action requested (specify full program title):**

1. **Brief description and purpose of proposed program. For proposed certificates (30+ credits), provide any existing degree or program under which the certificate falls.**

1. **Provide a list and description of institutionally approved expected student learning outcomes**

1. **Provide an institutionally approved plan for assessing student learning outcomes**

1. **Contribution and relationship of program objectives to**
	1. **NSHE Master Plan / Strategic Goals**
		1. **Access – *Increase participation in postsecondary education***

* + 1. **Success – *Increase student success***

* + 1. **Close the Achievement Gap – C*lose the achievement gap among underserved populations***

* + 1. **Workforce – *Collaboratively address the challenges of the workforce and industry education needs of Nevada***

* + 1. **Research – *Co-develop solutions to the critical issues facing 21st century Nevada and raise the overall research profile***

* 1. **Institutional mission and core themes**

* 1. **Campus strategic plan and/or academic master plan**

* 1. **Other programs in the institution**

* 1. **Other related programs in the System**

* 1. **If the program was not included in the NSHE Planning Report, please explain why.**

1. **Evaluation of need for the program**
	1. **The need for the program and the data that provides evidence of that need**

* 1. **Student population to be served**

* 1. **Procedures used in arriving at the decision to offer the program**

* 1. **Organizational arrangements required within the institution to accommodate the program**

* 1. **The timetable, with dates, for implementation steps**

* 1. **If this or a similar program already exists within the System, what is the justification for this addition? Please describe the nature and extent of the consultation with other institutions that have similar programs.**

* 1. **Evidence of employment opportunities for graduates (state and national). Include information on institutional review of the need for the program based on data from the Nevada P-20 Workforce Research Data System and/or any other applicable sources.**

1. **Detailed curriculum proposal**
	1. **Representative course of study by year (options, courses to be used with/without modification; new courses to be developed)**

* 1. **Program entrance requirements**

* 1. **Program completion requirements (credit hours, grade point average; subject matter distribution, preprogram requirements)**

* 1. **Accreditation consideration (organization (if any) which accredits program, requirements for accreditation, plan for attaining accreditation - include costs and time frame)**

* 1. **For certificates only: Name of any state, national and/or industry recognized certification(s) or licensing examination(s) for which certificate prepares the student, if applicable**

1. **Method of Delivery (for the purpose of state authorization [NC-SARA])**
	1. **How will this academic program be delivered when the program begins?
	(mark all that apply)**

[ ]  **100% face-to-face courses**

[ ]  **Hybrid (some online courses, some face-to-face courses)**

[ ]  **100% online courses**

* 1. **Learning Placements**

**Does the academic program have learning placements (e.g. internships, externships, clinical placements, student teaching, etc.) that *may take place outside the state of Nevada?***

[ ]  **Yes**

[ ]  **No.**

1. **Institutional Review Process**
	1. **Date of Faculty Review (may include additional information, as needed)**

* 1. **Describe the process for review and approval by the appropriate academic policy body of the institution**

1. **Readiness to begin program**
	1. **List the educational and professional qualifications of the faculty relative to their individual teaching assignments**

* 1. **List the anticipated sources or plans to secure qualified faculty and staff**

* 1. **Contribution of new program to department’s existing programs (both graduate and undergraduate) and contribution to existing programs throughout the college or university**

* 1. **Recommendations from prior program review and/or accreditation review teams**

1. **Resource Analysis**
	1. **Proposed source of funds (enrollment-generated state funds, reallocation of existing funds, grants, other state funds)**

* 1. **Each new program approved must be reviewed for adequate full-time equivalent (FTE) to support the program in the fifth year. Indicate if enrollments represent 1) students formally admitted to the program, 2) declared majors in the program, or 3) course enrollments in the program.**
		1. **(1) Full-time equivalent (FTE) enrollment in the Fall semester of the first, third, and fifth year.**

**1st Fall semester**

**3rd Fall semester**

**5th Fall semester**

 **(2) Explain the methodology/assumptions used in determining projected FTE figures.**

* + 1. **(1) Unduplicated headcount in the Fall semester of the first, third, and fifth year.**

**1st Fall semester**

**3rd Fall semester**

**5th Fall semester**

 **(2) Explain the methodology/assumptions used in determining projected headcount figures.**

* 1. **Budget Projections – Complete and attach the Five-Year Program Cost Estimate and Resource Requirements Table.**

1. **Facilities and equipment required**
	1. **Existing facilities: type of space required, number of assignable square feet, space utilization assumptions, special requirements, modifications, effect on present programs**

* 1. **Additional facilities required: number of assignable square feet, description of space required, special requirements, time sequence assumed for securing required space**

* 1. **Existing and additional equipment required**

1. **Describe the adequacy and availability of library and information resources**

1. **Student services**
	1. **Describe the capacity of student support services to accommodate the program. Include a description of admissions, financial aid, advising, library, tutoring, and others specific to the program proposal**

* 1. **Describe the implications of the program for services to the rest of the student body**

1. **Consultant Reports – If a consultant was hired to assist in the development of the program, please complete subsections A through C. A copy of the consultant’s final report must be on record at the requesting institution.**
	1. **Names, qualifications and affiliations of consultant(s) used**

* 1. **Consultant’s summary comments and recommendations**

* 1. **Summary of proposer's response to consultants**

1. **Articulation Agreements**
	1. **Articulation agreements were successfully completed with the following NSHE institutions. (Attach copies of agreements)**

* 1. **Articulation agreements have not yet been established with the following NSHE institutions. (Indicate status)**

* 1. **Articulation agreements are not applicable for the following institutions. (Indicate reasons)**

1. **Summary Statement**

**NEW PROGRAM PROPOSALS:**

**PROCESS FOR APPROVAL BY ACADEMIC AFFAIRS COUNCIL AND, IF REQUIRED, THE NEVADA BOARD OF REGENTS**

(October 2017)

Pursuant to Title 4, Chapter 14, Sections 7 and 8 of the Board of Regents *Handbook* and Chapter 6, Section 12 of the *NSHE Procedures and Guidelines Manual*, a new program, as proposed on this form, must be submitted by the NSHE institution for approval by the NSHE Academic Affairs Council. In addition, certain items must also be approved by the Board of Regents. The required approvals are specified below:

**Program Proposals Requiring NSHE Academic Affairs Council (AAC) Approval Only**

* Certificates 30 credit hours or more;
* Certificates of at least 9 and less than 30 credit hours that provide preparation necessary to take state, national and/or industry recognized certification or licensing examinations; and
* Study abroad programs.

**Program Proposals Requiring NSHE Academic Affairs Council AND Nevada Board of Regents Approval:**

* Degree, major or primary field of study for baccalaureate, master’s, and doctoral level programs (BA, BS, MA, MS, Ph.D, and named degrees);
* Emphases, major or primary field of study within the Bachelor of Applied Science (BAS);
* Primary field of study within an Associate of Arts, an Associate of Science, and an Associate of Business (AA, AS, and AB);
* Primary field of study within an Associate of Applied Science (AAS); and
* Emphasis, concentration, or options that are converted into a major.

**Note to Institutions: Following the required approval by the AAC and/or Nevada Board of Regents, institutions should determine whether the item requires submission to/approval by its accrediting organization (NWCCU) and take any necessary next steps with the accrediting organization.**