



Academic Year * 2025-2026

SGOCE #: * 05

Graduate Program Change Proposal

Form Procedure

To share the form with others prior to Submitting choose the Save Progress option at the bottom.

Create a PDF of the saved form go to Print and choose <u>Save as PDF</u> copy rather than print.

To access the saved form for editing or to finalize submission visit <u>forms.fitchburgstate.edu</u> to log in and view your

Pending/Drafts under My Fo	orms.					
Department/Com	mittee Information					
The main contact person for	r the Graduate Curriculum Committe	ee should fill out this form.				
Requestor Name:	* Megan Krell					
Members of the Graduate Curriculum Committee: Daneen Deptula Megan Krell Mark Williams Lynn D'Agostino Dieubon Francois - Student Representative						
Department / Unit Developi	ing: *Behavioral Sciences	v				
Department Chair:	Dr. Richard Wiebe	* rwiebe@fitchburgstate.edu				
Academic Dean :	Dr. Sara Levine	slevine@fitchburgstate.edu				
Program Chair	The Program Chair for this re * Yes No	request is among the people listed above.				
Program Information	tion					
This proposal refers to a (ch	hock all that apply). Cortificate	Program				
• •	, —	Program Teacher Licensure Program Degree Program				
Does the program run on a	cohort model? Yes W No	Vill additional faculty be needed, day/adjunct? ○ Yes • No				
Briefly describe program cha	ange to the existing program as it wi	ill appear in university catalog:				
Pause admissions to the Sc	thool Counseling Master's Program.					
Population/anticipated enrol	lment/staffing plan (i.e., Who/how n	many will program serve?)				
*N/A						
Rationale and expected outc						
		ating in May, there is not sufficient enrollment to warrant e in the program, and we will see out their degree.				
How does this change affect	the departments Learning Outcome	es for the program? List any changes that need to be made.				
Implementation plan (what	semester will new policy/policy chan	nge begin; will change be phased in)				
and the second s		ediately. Work with SGOCE to ensure currently enrolled students				
An old and new plan of stud	y must be included with this proposa	al (Please use template for program revision).				
If new courses are proposed	I or major changes are made to exis	sting courses, submit a Graduate Council New Course Approval form.				
Old Plan of Study Attached h	3					
New Plan of Study Attached						
Attach any letter(s) of suppo or others within or outside the	ort from professional agencies he university.					

Signatures

Negan Krell 10/23/2025 Sara Levine 10/29/2025	3039313937			*3534343239		
Academic Dean Signature: Date *3635343737 Date *3635343737 Date *3635343737 Date Date *3635343737 Date Date *3635343737 Date *36353437 Date *3635347 Date * .	Negan Krell	10/23/2025		Lara Levine	10/29/2025	
Department Chair Approval: Date Becky Copper Bleng SGOCE Dean Signature: Becky Copper Bleng SGOCE Dean Signature	Requester Signature:			Academic Dean Signature:		
Date SGOCE Dean Signature: Date SGOCE Dean Signature: Date ** ** ** ** ** ** ** ** ** **		323936		3033343737	•	
* Egraduate Council Chair Signature indicates that the Council has cussed this proposal and has decided it should move forward. Graduate Council Chair Signature Date	ichard Niebe	10/29/2025		Becky Copper Glenz		
Graduate Council Chair Signature indicates that the Council has cussed this proposal and has decided it should move forward. Graduate Council Chair Signature Date Notifications * proval of the President Date SGOCE Dean Initials Date		Date		SGOCE Dean Signature:	Date	
Graduate Council Chair Signature Notifications * proval of the President Date SGOCE Dean Initials Date Date	aduate Council e Graduate Council Chair Sid	nature indicates that the C	Council has	*		
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	proval of the President		Date		Date	
Reviewed by the Registrar: Date				*		
Reviewed by the Registral: Date				Deviewed by the Desistant	Data	
				Reviewed by the Registrar:	Date	