# New Academic Program Proposal Form: Fitchburg State University All University Committee 

* Required

1. Proposal Title *

Brief Synopsis of Proposal *
Summarize the outcome of this proposal, including changes that need to be made by Registrar. (Ex. Creation of new academic minor titled XXX)

## 2. Sponsor/Contact Person *

3. Sponsor's Department *

Sponsor's Phone *

Sponsor's Email *

## Collaborating Parties

Provide all the information requested in section \#3 for each of the collaborating parties.
A. This proposal is for (check one) *

Major (24-26 hours in a discipline)
Minor (15-21 hours outside a major; may be interdisciplinary)
Concentration (a set of unified courses within a major)
Certificate (a set of unified courses evidencing expertise in an area)
B. In what division/s will this program be offered? *

Day
Continuing Education
Both
C. Program name *
D. Major Department (for interdisciplinary programs, list all departments involved)*
E. Description as it will appear in the catalog *

## F. Intended date of implementation *

G. Recommended Classification of Instructional Programs (CIP Code)*

Visit the NCES site for CIP codes: https://nces.ed.gov/ipeds/cipcode/browse.aspx?y=55

## 5. Academic Program Requirements

List the program requirements, including minimum number of credit hours, required courses, and any special requirements, including theses, internships, etc. Indicate if there are choices among groups of courses. Indicate whether courses are "new." (Each new course requires a New Course Form and appropriate documentation.)

## Admission Requirements *

Include GPA, lower division prerequisites, etc.

## Program Curriculum

Required Courses, Electives, and Required General Education Courses

Spreadsheet: Program Curriculum *
Download, complete, and upload this spreadsheet:
https://docs.google.com/spreadsheets/d/1M9HvJQJT_5oYosaRzZqBFIKopjZL1wt30U8pxs28fGg/edit? usp=sharing

## Total Number of Courses to Be Taken *

## Total Number of Credit Hours Required *

Typical Curriculum: Attach a Four Year Plan of Study *
6. Justification (complete only for new Majors)

Complete this section only for new Majors. If more space is needed, include an attachment below.

## A. Students

Evidence of Student demand; Estimated enrollment in the first year; Five year projected student enrollment; Students to be served; Transferability of program participants' credits to and from other institutions

## B. Market Analysis

Need for graduates in the local/regional/state labor market; Identify existing programs in the region as it concerns program duplication; Distinguish this program from others already in existence.
C. Explain how the proposed program is consistent with the mission andL strategic plan of the university

Reference specific sections of the Mission, Vision, Core Values and/or the Strategic Plan

## 7. Outcomes and Assessment

## A. Expected Outcomes *

Indicate the expected learning outcomes and competencies anticipated for students who complete this program.

## B. Assessment *

Describe the assessment procedures and at what point they will be used to evaluate the students competency in terms of the learning goals, skills, and other competencies described above. Be specific about assessment methodology.

## 8. Resources

A. Identify additional staff required *

Specify positions
B. Identify faculty prepared to teach in the program and changes to the current course offerings of these faculty due to the commitment to the new program *
C. Indicate what special materials, equipment, and space will be required and estimated cost *
D. Library *

Indicate what additional library resources are needed

## E. Other costs *

i.e., faculty development for certifications or licensure; internship supervision costs, special classroom needs, etc.
F. Impact on other programs and the home department *
9. All proposals that involve curriculum change require review by the Department Curriculum Committee and the Department Chair.

Department Curriculum Committee Vote (For / Against / Abstain)*

Name of Chair, Department Curriculum Committee *

Name of Chair, Department *
10. Submitted to Appropriate Dean(s) *

Yes

Name of Dean(s)*

