# Program CHANGE Proposal

This form is to be used to present the Curriculum Committee with changes to an existing program. These changes will be reflected in the 2025 - 2026 catalog.

1. Email *

2. Proposal submitted by (faculty member): *

3. Department *

   *Mark only one oval.*

   ( ) Counseling, Therapy, and School Psychology

   ( ) Teaching, School Counseling, and Leadership Studies

   ( ) CCE

4. Program title *

5. Degree(s) affected *

6. Date submitted *

   *Example: January 7, 2019*

7. Semester and year proposal to become effective *

*Mark only one oval.*

◯ Summer 2025 (earliest possible)

◯ Fall 2025

◯ Spring 2026

◯ Other: _____

## Changes Proposed

This section outlines what is changing and why.

8. Which types of changes are proposed? Select all that apply. *

*Check all that apply.*

☐ Change in total credits required

☐ Change in program requirements (includes adding and removing courses)

☐ Change in degree awarded

☐ Change in program title

☐ Add/delete a program option (for example, a new track)

☐ Other: _____

9. Please describe in detail the change you are proposing and how the new program will * differ from the current one.

_____

_____

_____

_____

_____

Supporting Documentation  The following documents are REQUIRED.

1. Current Course Sequence Sheet
2. Proposed Course Sequence Sheet
3. Teach out plan (consult with Registrar if needed)

Please paste or type your responses below. If needed, additional documents can be uploaded using the ADD FILE option at the end of this section.

10.  Current program plan (please attach below). Include here any additional information/description of key program elements (current course sequence, prerequisites, total semester hours, etc.) *

11.  New or proposed program plan (please attach below) Include here any additional information/description of key program elements (current course sequence, prerequisites, total semester hours, etc.) *

12.  New catalog copy, if necessary:

13. Additional information that may be needed to evaluate this change and the impact it will have on students' experience in the program:

_____

_____

_____

_____

_____

14. Please upload any additional supporting documentation.

Files submitted:

Rationale, intended outcomes, and resource requirements

Please paste or type your responses below. If needed, additional documents can be uploaded using the ADD FILE option at the end of this section.

15. What is the primary purpose or motivation for this change? *

_____

_____

_____

_____

_____

16. What data have you used to support this change? *

_____

_____

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_____

_____

17. What is the intended outcome of this change? *

18. What effect will this have on teaching loads in the program, department, and/or graduate school? *

19. Does this change require any additional library support or special technology? If so, please describe. *

20. Are there any special facilities or additional equipment required for this change? If so, please describe. *

21. Please upload any additional supporting documentation.

    Files submitted:


22. I confirm that I have contacted the registrar's office regarding the teach out plan for   *
    this program. (If you have not, please do so prior to submitting this proposal.)

    *Check all that apply.*

    ☐ Yes
    ☐ No

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Google Forms