

FORM G
BOARD OF REGENTS, STATE OF IOWA
PROPOSAL FOR PROGRAM/DEPARTMENT CHANGE
July 1, 2015

Institution: _____

Current Title of Program/Department: _____

Proposed Title of Program/Department: _____

Name of College: _____

Current CIP Discipline Specialty Title: _____

Proposed CIP Discipline Specialty Title: _____

Current CIP Discipline Specialty Number (six digits): _____

Proposed CIP Discipline Specialty Number (six digits): _____

Current Level: B _____ M _____ D _____ FP _____

Proposed Level: B _____ M _____ D _____ FP _____

Degree Abbreviation (e.g., B.S., B.A., M.A.): _____

Approximate date to implement changes: Month _____ Year _____

Contact person: (name, telephone, and e-mail) _____

Please do not use acronyms without defining them.

1. Provide a brief description of the current department/program.
2. Describe reasons (justification) for the proposed changes. Include information about the value of the changes to the department, program, discipline, college, and/or the university.
3. What will be the effect of the proposed change on current students?
4. If this is a program/department name change, describe the proposed name is consistent with the mission of the college and university.
5. Will the proposed change be consistent with other programs at the university or other universities in the state? If this is a program/department name change, identify other institutions with the same or similar name.
6. Is the proposed change consistent with association/accreditation requirements? Have accreditation requirements been addressed?
7. Describe program configuration changes that will result from the proposed program change, e.g., change in number of credit hours required, etc.
8. What costs will be incurred by the proposed program change? Identify new resources that will be needed in connection with the proposed program change, e.g., facilities, faculty, funds, etc. How will the proposed program change be administered? Provide a three-year analysis of costs resulting from the proposed program change.
9. Is this intended to be a temporary or permanent change? If temporary, for how long?
10. What are the workforce needs in the state for the proposed program change? Be as specific as possible and include sources of data.
11. Provide any other information that might be helpful to the Board of Regents in considering this request.