

PROGRAM REVISION PROPOSAL

**All forms must be submitted with:
Department minutes showing discussion/approval and signed hard copy to Academic Affairs.
Attach NEW program outline.**

Section 1 - GENERAL INFORMATION			
Initiator:	Division:	Date Submitted:	Effective Term/Year:
E-mail:	Phone Number:	State Mandated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Section 2 - PROGRAM DETAILS - CURRENT <input type="checkbox"/> Technical Certificate <input type="checkbox"/> CTE (PSAV)		Degree Type: <input type="checkbox"/> B.A. <input type="checkbox"/> B.S. <input type="checkbox"/> A.A. <input type="checkbox"/> A.S.	
CIP Code: TCC Program ID:	Program Title (no abbreviations):		
DOES THE CIP CODE CHANGE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
IF NOT STATE MANDATED- Rationale for revising program:			
Section 3 - PROGRAM DETAILS - REVISED <input type="checkbox"/> Technical Certificate <input type="checkbox"/> CTE (PSAV)		Degree Type: <input type="checkbox"/> B.A. <input type="checkbox"/> B.S. <input type="checkbox"/> A.A. <input type="checkbox"/> A.S.	
CIP Code: TCC Program ID:	Program Title (no abbreviations):		

Section 4 - MODIFY - to add/delete courses, section 5

FROM	TO
Program Title:	Program Title:
Total Credit Hours:	Total Credit Hours:
Total Clock Hours	Total Clock Hours:
Program Description:	Program Description:
Other Program Changes:	

Section 5 -ADD/DELETE COURSES

[illegible]

	COURSES TO BE ADDED TO PROGRAM	COURSES TO BE DELETED FROM PROGRAM				
PROGRAM ELECTIVES	Course ID	Course Title	Credit/ Clock Hours	Course ID	Course Title	Credit/ Clock Hours
Section 6 - PROGRAM DELETION INFORMATION (for revisions with CIP Code change)						
CIP Code: TCC Program ID:	Program Title (no abbreviations):					
Last Date/Term for Admission to Current Program:	Number of Students Enrolled:					