



## Intro Block

This form must be submitted by a CLAS chair or director. If you are submitting on behalf of someone in that role, please have the approving individual send an email to [CLAS.EPCC@ucdenver.edu](mailto:CLAS.EPCC@ucdenver.edu) indicating their approval of this request.

I acknowledge/confirm that my department and I have made an effort to diversify the teaching materials, resources and methods to represent diverse perspectives in this syllabus and course, as much as possible. We ensure that it includes authors from marginalized groups, when possible, so that students are exposed to scholars and practitioners from across the discipline/field of study, inclusive of race, gender, class, sexual orientation, ability, ethnicity or other identities.\*

Yes

Other

Please Explain

**What is happening?**

What are you requesting? \*

- Entirely new program (new degree, certificate, minor, subplan, or microcredential)
- Program title change
- Collapsing 2 or more existing programs into 1

**Collapsing two or more**

Which 2 (or more) programs are you wanting to combine? \*

For the following questions, if you are unsure what you should be listing, please use an existing catalog page as an example

Please list out the current **Program Requirements** \*

Please list out the proposed **Program Requirements**, as you want them to appear in the catalog \*

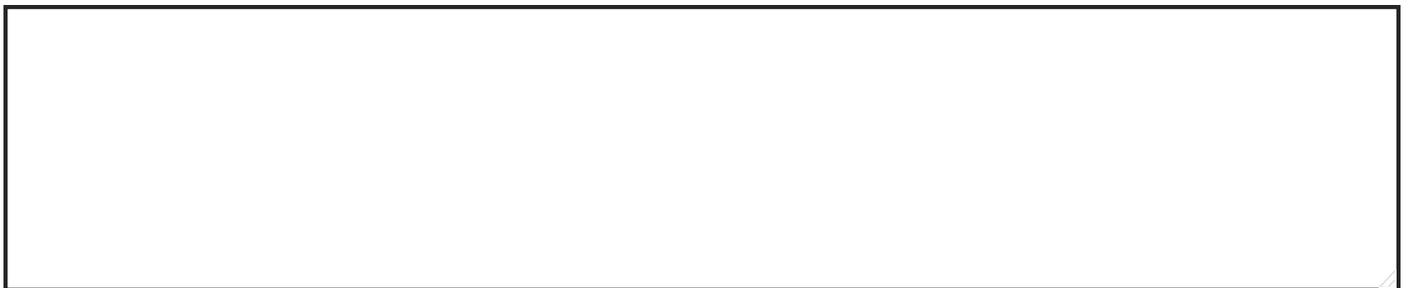
Please list out all current **Program Restrictions, Allowances and Recommendations** \*



Please list out all proposed **Program Restrictions, Allowances and Recommendations**, as you want them to appear in the catalog \*



Please list out the current **Required Courses** \*



Please list out the proposed **Required Courses**, as you want them to appear in the catalog \*

Please list out the current **Elective courses** (if there are none, write N/A) \*

Please list out the proposed **Elective courses**, as you want them to appear in the catalog (if there are none, write N/A) \*

## Basic Program Information

Department this program will be associated with \*

What type of program is this? \*

Is this certificate approved for both degree-seeking and non-degree students? \*

- Yes
- No

Is this 4+1 built off of new or existing Bachelors and Masters degrees? \*

*Please note that if the 4+1 requires the creation of a new Bachelors and/or Masters degree, then a New Program Proposal Form should be submitted for any new degrees, along with a form for the 4+1.*

- New
- Existing

Academic Level \*

- Undergraduate
- Graduate
- Non-Degree Graduate
- Non Credit
- Professional
- 4+1

Should this program appear on transcripts? \*

- Yes
- No

Should this program print in the catalog? \*

- Yes  
 No

Effective Term \*

*Note that the catalog is updated once per year and catalogs run Fall - Summer of each year, so program updates will be published in the Fall of each new catalog year. Changes submitted after the catalog editing deadlines will appear in the following year's catalog.*

## Detailed Program Information

Formal Program Title \*

Degree Type (BA, BS, MA, etc.)\*

Do 50% of courses come from an approved degree program?\*

- Yes  
 No

Major, minor, licensure, endorsement, or certificate this subplan is associated with:\*

Is this program online only? \*

- Yes  
 No  
 Hybrid

Include on Admissions Application?\*

- Yes  
 No

Who will be the Certificate Advisor for this certificate?\*

## Final CIM Questions

Is this program offered completely or partially off campus? \*

- Yes  
 No

Does this program lead to the possibility of licensure in any U.S. state? \*

- Yes  
 No

Enter the program learning outcomes (if you have them)

## Title Change questions

What is the current title? \*

What should the new title be? \*

## Program Requirements

For the following questions, if you are unsure what you should be listing, please use an existing catalog page as an example.

If you are submitting for a 4+1 degree, please be sure to list out

BOTH the undergraduate and graduate level requirements and courses, along with information on which, if any, courses can count towards both the Bachelors and the Masters degrees.

Please outline the **Program Requirements** below, as you want them to appear in the catalog. **Do NOT list courses here.** \*

*This will be anything that should be listed under this header:*

**Program Requirements**

Please outline the **Program Restrictions, Allowances and Recommendations** below, as you want them to appear in the catalog. **Do NOT list courses here.** \*

*This will be anything that should be listed under this header:*

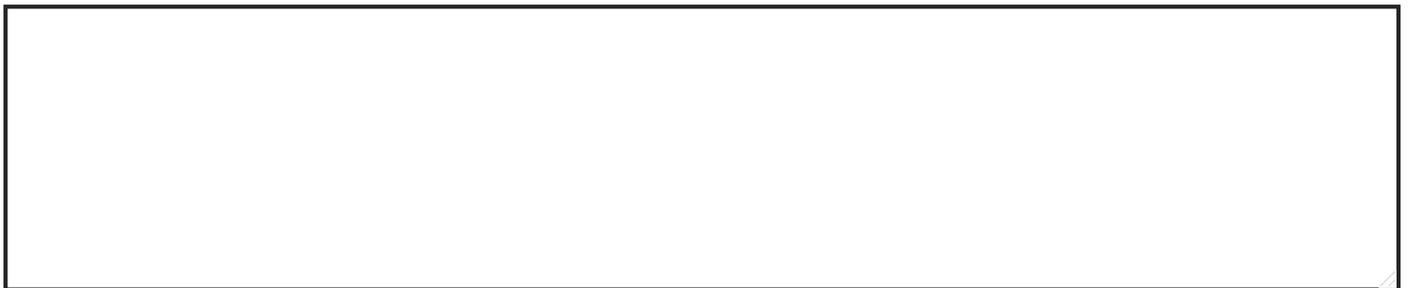
**Program Restrictions, Allowances and Recommendations**



Please list out **all required courses** below, as you want them to appear in the catalog \*



Please list out any **elective courses** below, as you want them to appear in the catalog (*if there are no elective courses for this program, just write "N/A"*) \*



## EPCC Information

### Justification and Demand\*

### Resources\*

*(Describe how existing resources will support this program. How will this fit into your current instructional budget and course offerings and how will you ensure students are able to complete this program in a timely manner. Describe the implementation plan. If new resources are required, please provide documentation of approval for the additional budget.)*

## Upload preliminary assessment plan\*

Please upload any supporting documents

Please upload any additional documents here

## Cross-Disciplinary Overlap \*

*(Using the CU Denver Academic Catalog and departmental websites, search for any potential overlap with existing courses or programs across the college and the university. Identify and explain any overlap, and summarize all cross-departmental agreements and resolutions. Include documentation of your communication with the chair(s) of the department(s)/program(s) involved when submitting your proposal to the EPCC(e.g. e-mails*

*or letters of support). Failure to identify potential overlap, communicate and collaborate with relevant departments/programs prior to submission to the EPCC may result in the tabling of this program proposal. Note that all new program proposals and revisions will be reviewed by the University Curriculum Committee.)*

### **Curriculum Notes and Recommendations\***

*(Please list any additional information that you think might be useful to a student making the decision to take this program, including any exceptions to CLAS graduation requirements or policies that you are seeking approval for. You might list the high-impact practice(s), experiential learning, internships and career readiness, skills and dispositions acquired in the program. You might describe other recommended preparation for the program (e.g., performance in or completion of previous coursework) that will support student success. These recommendations will NOT be enforced as pre- or co-requisites and will NOT prevent registration for the program. You may not administratively drop a*

*student who does not meet these qualifications. This information will be included in the program description.)*

Was this curriculum reviewed and approved by your department's curriculum committee?\*

- Yes
- No

Name - who is submitting this form? \*

Please enter the email address where you would like a copy of this form sent. \*



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