

IMPORTANT INFORMATION!

The implementation of using the new application tool and format “PROPOSAL FOR A NEW DEGREE PROGRAM” (below) begins with all Notification of Intent to Submit Proposals (NISPs) received starting on Monday, March 23, 2015.

For NISPs already received by Commission staff (prior to March 23, 2015), the institution may use the old or new program proposal application tool, as they so choose.

The reason for not requiring use of the new application tool for already received NISPs (prior to March 23, 2015) is so that institutions will not have to potentially rewrite or adjust their already begun program proposal work.

NEW APPLICATION TOOL FOLLOWS DIRECTLY BELOW

Alabama Commission on Higher Education

PROPOSAL FOR A NEW DEGREE PROGRAM – NEW APPLICATION TOOL

Please check one: Baccalaureate Program Graduate Program

A. General Information

1. Institution:

2. Institutional Contact Person:
Title:
Telephone:
E-mail:

3. Program Identification--
Field of Study/ Program Title:
Degree:
CIP Code:

4. Date of Proposal Submission:

5. Proposed Program Implementation Date:

6. Program Administration:
Name of College/School:
Name of Dean:
Name of Department:
Name of Chair:

Note: Please expand all response fields as necessary.

B. Program Purpose and Description

1. In no more than one paragraph describe the purpose of the proposed program. Please also include a brief statement regarding how the program's purpose is related to the University's mission and goals.

2. Please provide a description of the specific kinds of employment opportunities, post-graduate professional degree programs, and other graduate programs that will be available to the graduates.

3. Succinctly list at least four (4) but no more than seven (7) of the most prominent ***student learning outcomes*** of the program. These outcomes should lend themselves to subsequent review and assessment of program accomplishments.
 - 1)
 - 2)
 - 3)
 - 4)
 - 5)
 - 6)
 - 7)

C. Need for the Program

1. **State need.** Briefly describe why the program is specifically needed for the State of Alabama. (State need is considered a priority in the review process.)

2. **Employment Opportunities.** Based on your research on the employment market for graduates of this program, please complete the following table reporting the total projected job openings (including both growth and replacement demands) in your local area, the state, the SREB region, and the nation. These job openings should represent positions that require graduation from a program such as the one proposed.

Career and College Readiness/Preparation -- Projected Job Openings

	Year 1	Year 2	Year 3	Year 4	Year 5	Total
Local						
State						
SREB						
Nation						

Please briefly describe your methodology for determining employment opportunities – projected job openings. Be sure to cite any data sources used in formulating these projections. The actual survey instrument, detailed results, and associated data file(s) must be maintained internally by the institution for five years from the implementation date. The survey upon which the proposal is based must be available for ACHE Staff examination upon request for that five year timeframe. The survey instrument, detailed results, or associated data file(s) should not be included in the proposal.)

3. Student Demand - Enrollment projection. Please briefly describe your methodology for determining enrollment projections. If a survey of student interest was conducted, please briefly describe the survey instrument, number and percentage of respondents, and summary of results. (The survey instrument, and associated data file(s) need not be included in the proposal. This proposal information should be maintained for ACHE Staff review for five years from the actual implementation date.)

D. Specific Rationale (Strengths) for Program

What is the specific rationale (strengths) for recommending approval of this proposal? List no fewer than three (3) and no more than five (5) potential program strengths.

- 1.
- 2.
- 3.
- 4.
- 5.

Please note that letters of support may be included with the proposal.

E. Similar Programs

Using the ACHE Academic Program inventory found at <http://www.ache.state.al.us/Content/Departments/Instruction/StudentInfo.aspx> List below all programs at the same degree level (by institution) that utilize the same 6-digit CIP code as the one being requested in the program proposal.

Also, list any programs at other CIP codes that may be offering similar instruction.

If there are no similar programs place a "0/none" by 1. in the listing directly below.

Note: Institutions should consult with ACHE Staff during the NISP phase of proposal development to determine what existing programs are considered duplicative of the proposed program.

The following institutions offer similar programs at this level:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Please add numeration and list additional similar programs, if applicable.

If the program duplicates, closely resembles, or is similar to another program already offered in the State, provide justification for that duplication. Also, if a graduate program, please identify and list any similar programs at institutions in other SREB states.

F. Collaboration With Other Institutions/Agencies

Does the institution plan on collaborating with other institutions in the delivery of this program?

Yes

No

If yes, please indicate below which institutions and describe the basis of this collaboration.

If no, please indicate your reasons why.

G. Curriculum

1. Program Completion Requirements: (Enter a credit hour value for all applicable components, write N/A if not applicable)

Credit hours required in major courses _____

Credit hours required in minor _____

Credit hours in institutional general education or core curriculum _____

Credit hours required in support courses _____

Credit hours in required or free electives _____

Credit hours for thesis or dissertation _____

Total credit hours required for completion _____

2. Will this program be related to other programs at your institution?

If so, which ones and how?

3. Please identify any existing program, option, concentration or track that this program will replace at your institution.

4. Is it likely that this program will reduce enrollments in other graduate programs at your institution? If so, please explain.

5. If this is a graduate program, please list any existing undergraduate programs at the institution which are directly or indirectly related to the proposed graduate program. If this is a doctoral proposal, also list related master's programs at your institution.

6. Please complete the table below indicating the proposed program's courses. Include the course number, and number of credits. (If feasible/useful, please group courses by sub-headings within the table.)

Course Number and Title	Number of Credit Hours	* If New Course

7. Enumerate and briefly describe any additional requirements such as preliminary qualifying examination, comprehensive examination, thesis, dissertation, practicum or internship, some of which may carry credit hours included in the list above.

8. Does the program include any options/concentration. If so, please describe the purpose and rationale and list the courses in the option.

9. State and list if the program has any special admission requirements. If none, state: "The program has no special admission requirements".

H. Program Review and Assessment

In the final analysis, the institution and its governing board are accountable for the quality, utility and productivity of this and all other programs of instruction.

With this in mind, please describe the procedures that will be used in assessing the program's outcomes.

Be sure to include:

1. An assessment process for the student learning outcomes;
2. A follow-up plan to determine accomplishments of graduates such as obtaining relevant employment or being admitted to a masters or doctoral program (graduate or professional).

I. Accreditation

If there is a recognized (USDE or CHEA) or other specialized accreditation agency for this program, please identify the agency and explain why you do or not plan to seek accreditation. If there is no accrediting or similar body for this degree program state as such in your response.

J. Instructional Delivery Method

1. Describe which instructional delivery methods will be utilized in delivering this program.
2. If distance technology is being utilized, indicate an approximate percent of the total program's courses offered that will be provided by distance education_____ %
3. If distance education is not being utilized, please explain why not.

K. Resource Requirements

1. Faculty. Do not attach the curriculum vitae of each existing or additional faculty members to this proposal. (The institution must maintain and have current and additional primary and support faculty curriculum vitae available upon ACHE request for as long as the program is active.) *Please do provide a brief summary of Faculty and their qualifications specific to the program proposal.*

a) Please provide faculty counts for the proposed program:

Status	Faculty Type	
	Primary	Support
Current- Full Time		
Current-Part Time		
Additional-Full Time (to be hired)		
Additional-Part Time (to be hired)		

b) Briefly describe the qualifications of new faculty to be hired.

2. Equipment. Will any special equipment be needed specifically for this program?

Yes No

If "Yes", please list:

The cost of the new equipment should be included in the table following (Section K.).

3. Facilities. Will any new facilities be required specifically for the program?

Yes No

If "Yes", please list. Only new facilities need be listed. Their cost should be included in the table following (Section K.).

4. Library. Are there sufficient library resources to support the program?

Yes No

Please provide a brief description of the current status of the library collections supporting the proposed program.

If “No”, please briefly describe how any deficiencies will be remedied; include the cost in the table following (Section K.).

5. Assistantships/Fellowships. Will you offer any assistantships specifically for this program?

Yes No

If “Yes”, how many assistantships will be offered? Be sure to include the amount in the table following.

Number of assistantships offered

Be sure to include the cost of assistantships in the table following (Section K.).

6. Program Budget. The proposal projected that a total of \$ in estimated new funds will be required to support the proposed program.

A projected total of \$ will be available to support the new program.

L. New Academic Degree Program Proposal Summary Form

- In the following “NEW ACADEMIC DEGREE PROGRAM PROPOSAL SUMMARY” table, please provide a realistic estimate of the costs of the program.
- This should only include the additional costs that will be incurred, not current costs.
- Indicate the sources and amounts of funds available for the program’s support.
- DO NOT LEAVE ANY PORTION/SOURCES OF THE NEW FUNDS OR FUNDS AVAILABLE BLANK. ENTER “\$0” IF THERE ARE NO NEW FUNDS NEEDED OR NO FUNDS AVAILABLE.
- THERE MUST BE AN ACTUAL DOLLAR AMOUNT PROVIDED FOR TUITION, SINCE THOSE FIGURES REPRESENT PROJECTED ENROLLED STUDENTS.
- **If it is stated that new funds are requested or if it is a reallocation of resources, please explain directly below from what source(s) the funds for the proposed new program, (e.g. faculty, equipment, etc.) will be attained.**
- **If tuition is used to support the program, what start-up revenue source will be used to initiate the program.**

Also, include enrollment and completer projections.

- New enrollment headcounts are defined as **unduplicated** counts across years. For example, if “Student A” would be initially enrolled in the program in year 2, and again is enrolled in the program in years 4 and 5; “Student A” is only counted in the new enrollment headcount in year 2.
- Total enrollment headcounts represent the actual number of students enrolled (both part-time and full time each year. This is a **duplicated** count).

