*Alabama Commission on Higher Education*

**PROPOSAL FOR A NEW DEGREE PROGRAM**

1. **Date of Proposal Submission:**

**Full program name and level:**

**CIP Code:**

1. **Learning Outcomes and Program Review:**

Succinctly list at least four (4) but no more than seven (7) of the most prominent student learning outcomes of the program.

1.
2. **Employment Outcomes and Program Demand**

Indicate the primary industry where graduates would seek employment using the North American Industry Classification System (NAICS): <https://www.naics.com/search/>

NAICS

Select up to 3 Standard Occupational Codes (SOCs) where graduates would seek employment: <https://www.bls.gov/soc/2018/major_groups.htm>

SOC 1

SOC 2

SOC 3

Please explain whether further education/ training is required for graduates of the proposed program to gain entry-level employment in the occupations you have selected.

Please describe how you will determine whether graduates are successful in obtaining relevant employment or pursuing further study.

Briefly describe how the program fulfills a specific industry or employment need for the State of Alabama. Please include local and statewide occupational projections, along with data sources as appropriate.

Briefly describe evidence of student demand for the program, including enrollments in related coursework at your institution if applicable. If a survey of student interest was conducted, please briefly describe the survey instrument, number and percentage of respondents, and summary of results.

1. **Curriculum and Prerequisites**

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

Credit hours required in program courses \_\_\_\_\_\_\_\_

Credit hours in general education or core curriculum \_\_\_\_\_\_\_\_

Credit hours required in support courses \_\_\_\_\_\_\_\_

Credit hours in required or free electives \_\_\_\_\_\_\_\_

Credit hours in required research \_\_\_\_\_\_\_\_

**Total credit hours required for completion \_\_\_\_\_\_\_\_**

Please indicate the maximum number of credits that can be transferred in from another institution and applied to the program:

Please describe any work-based learning activities that are required or recommended for program completion (including internships, practical/clinical experience, applied research, or other immersive experiences designed to prepare graduates for employment in the field).

Does the program include any options/concentrations? If so, please describe the purpose and rationale for the options, and list the courses for each in the table below.

Please complete the table below indicating all coursework for the proposed program, specifying any new courses developed for the program, along with courses associated with each option as applicable. Include the course number, and number of credits. Coursework listed should total the number of hours required to complete the program.

|  |  |  |
| --- | --- | --- |
| Course Number and Title | Number of Credit Hours | \* If New Course |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Intended program duration in semesters for full-time students:

Intended program duration in semesters for part-time students:

Please indicate any prior education or work experience required for acceptance into the program:

Describe any other special requirements for the program:

1. **Specific Rationale (Strengths) for Program**

What is the specific rationale for recommending approval of this proposal? List 3-5 potential program strengths.

Please list any external entities that have supplied letters of support attesting to the program’s strengths, and attach letters with the proposal.

1. **Program Resource Requirements**

**A. Faculty.** Please provide or attach a brief summary of primary and support faculty that includes their qualifications specific to the program proposal. Note: Institutions 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, but you do not need to submit CVs with this proposal.

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) |  |  |

Note: Annual compensation costs for additional faculty to be hired should be included in the program summary table below.

Briefly describe the qualifications of new faculty to be hired:

**B. Staff.** Will the program require dedicated staff? Yes No

If so, indicate the number or percentage of FTEs. Salary/ benefits costs should be included in the program summary table below.

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

 Yes No

If yes, please list. Their cost should be included in the program summary table below.

**D. 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 program summary table below.

**E. Library.** Will additional library resources be required to support the program?

 Yes No

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

If yes, please briefly describe how any deficiencies will be remedied, and include the cost in the program summary table below.

**F. 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 costs in the summary table below.

**New Academic Degree Program Summary Table: Instructions**

* In the following NEW ACADEMIC DEGREE PROGRAM SUMMARY table, please provide a realistic estimate of the costs of the program over the first seven years of implementation.
* This should only include only \***the additional costs*\**** that will be incurred after implementation, not to include any current costs. For instance, if new faculty will be hired for the program, new faculty salary/ benefits should be included for each year following implementation, but salary/benefits for existing faculty would not be included.
* Indicate the **\*new\*** sources and amounts of funds available for the program’s support, not to include any current revenues. For instance, if the proposed program will replace an existing program or option, you would only count tuition for additional students over and above the current revenue levels.
* For enrollment and completer projections.

New enrollment headcounts are unduplicated counts across years, and a student will only be counted once during the year in which they first enroll. For example, if “Student A” would be initially enrolled in the program in year 2, and again is enrolled in the program in years 3, 4 and 5; “Student A” is only counted in the new enrollment headcount in year 2.

Total enrollment headcounts represent the total number of students enrolled, both part-time and full-time each year. This is a duplicated count, so that a student enrolled for four years would be included in enrollment counts for all four years. Please be sure total enrollments account for new students entering the program and subtract out students completing the program in the previous year.

* Completion projections **must meet minimum viability requirements** set by §16-5-8(2) of the *Code of Alabama, 1975*:

Associate degree 7.5 graduates per year on average

Baccalaureate degree 7.5 graduates per year on average

Master’s degree 3.75 graduates per year on average

Doctoral degree 2.25 graduates per year on average

* New enrollment projections must be sufficient to ensure that the program will be sustainable over time and meet minimum viability requirements for program graduates. Therefore, new enrollment numbers must exceed completion numbers to account for attrition or enrollment fluctuations.

|  |
| --- |
| **NEW ACADEMIC DEGREE PROGRAM PROPOSAL SUMMARY** |
| ***INSTITUTION:*** |
| ***PROGRAM:*** |
| **ESTIMATED NEW FUNDS REQUIRED TO SUPPORT PROPOSED PROGRAM** |
|  | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 | **TOTAL** |
| FACULTY |  |  |  |  |  |  |  |  |
| STAFF |  |  |  |  |  |  |  |  |
| EQUIPMENT |  |  |  |  |  |  |  |  |
| FACILITIES |  |  |  |  |  |  |  |  |
| LIBRARY |  |  |  |  |  |  |  |  |
| ASSISTANTSHIPS |  |  |  |  |  |  |  |  |
| OTHER (specify above) |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |
| **SOURCES OF FUNDS AVAILABLE FOR PROGRAM SUPPORT** |
|  | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 | **TOTAL** |
| INTERNAL REALLOCATIONS |  |  |  |  |  |  |  |  |
| EXTRAMURAL |  |  |  |  |  |  |  |  |
| TUITION |  |  |  |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |
| **ENROLLMENT PROJECTIONS** ***Note: “New Enrollment Headcount” is defined as unduplicated counts across years.*** |
|  | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 | **6-YEAR AVERAGE** |
| FULL-TIME HEADCOUNT | Year 1 - No data reporting required |  |  |  |  |  |  |  |
| PART-TIME HEADCOUNT | Year 1 - No data reporting required |  |  |  |  |  |  |  |
| TOTAL HEADCOUNT | Year 1 - No data reporting required |  |  |  |  |  |  |  |
| NEW ENROLLMENT HEADCOUNT | Year 1 - No data reporting required |  |  |  |  |  |  |  |
| **DEGREE COMPLETION PROJECTIONS*****Note: Do not count Lead “0”s and Lead 0 years in computing the degree completions projections average.***  |
|  | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 | Year 7 | **AVERAGE** |
| DEGREE COMPLETION PROJECTIONS | Year 1 - No data reporting required |  |  |  |  |  |  |  |