***ALABAMA COMMISSION ON HIGHER EDUCATION***

***INSTRUCTION***

**Form C: Proposal Form for the Addition of an Option, Track, Specialization, or**

**Concentration, etc., to an Existing Program**

1. Institution:
2. CIP Code, Program Title, and Degree Nomenclature of the existing program [see instructions below]:

Refer to the institution’s Academic Program Inventory for the current CIP code, program title, and degree nomenclature for the existing program to which the extension will be added. This information is necessary for the review and evaluation of your request. Failure to include this information will cause a delay in processing the request.

***Note*: In order to complete the form, please consult the Academic Program Inventory for the recognized program CIP code, program title, and degree nomenclature at:** [**http://www.ache.alabama.gov/Acadaffr/ProgInv/Instrprg.htm**](http://www.ache.alabama.gov/Acadaffr/ProgInv/Instrprg.htm) .

 *[Example: CIP 44.0401, Public Administration, MPA]*

1. Name of the proposed extension:

*[Example: Option in Non-Profit Administration]*

1. Fill in the table provided with the following information:
	1. For certificate, associate, and baccalaureate programs, the number of hours in the General Education Curriculum.
	2. For all program levels, the number of hours in the program core. The program core includes all courses in the major taken by students regardless of option, concentration, specialization, or track.
	3. For all program levels, the number of hours in the proposed option, specialization, concentration, track, etc.
	4. For all program levels, the total hours in the program including the new extension/alteration.

|  |  |
| --- | --- |
| Semester Hours in the General Education Curriculum (Certificate, Associate, and Baccalaureate Programs Only) |  |
| Semester Hours in the Program Core |  |
| Semester Hours in the Option, Concentration, Etc. |  |
| Semester Hours in Additional Coursework (Electives, supporting courses, etc.) |  |
| Total Semester Hours in the Program with the Proposed Extension/Alteration |  |

1. List the courses in the program core with the number of semester hours for each:
2. List the courses in the proposed option, concentration, specialization, or track, etc., with the credit hours for each:
3. What is the scope or effect of the proposed extension?
	1. How many of the major courses to be offered by the proposed extension are offered in the existing program?
	2. How will the proposed extension impact other public institutions?
	3. Will the proposed extension move the program listing to a new two-digit CIP category in the Commission's academic program inventory?
4. What is the impact of the proposed change on the existing program or unit?
	1. What will be the budgetary impact of the proposed extension?
	2. What changes in faculty and staff will be required to implement the proposed extension/alteration?
5. If the extension will require additional resources, please provide a list of sources of funds available for the extension.
6. Please state the rationale for the extension/alteration.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Institution’s Authorized Representative Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution