

**DOCUMENT N: COURSE AND PROGRAM DEVELOPMENT COVER SHEET**

Instruction: See Course and Program Development Policy and Procedures

SHORT TITLE OF PROPOSAL: HSAD MS Program Elective Area Revisions

COURSE #

Box 1: TYPE OF ACTION	ADD(NEW) <input type="checkbox"/>	DEACTIVATE <input type="checkbox"/>	MODIFY <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>
Box 2: LEVEL OF ACTION	Non-Credit <input type="checkbox"/>	Undergraduate <input type="checkbox"/>	Graduate <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

Box 3: ITEM OF ACTION (check appropriate boxes)		APPROVAL SEQUENCE (see box 4 below)	DOCUMENTS REQUIRED (see box 5 on back)	INFO COPIES (see 2 on back)
<input type="checkbox"/>	1 Experimental Course <sup>1</sup>	AC	NOP	
<input type="checkbox"/>	2 Course Title	ABCD	NO	
<input type="checkbox"/>	3 Course Credits	ABCD	NO	
<input type="checkbox"/>	4 Course Number	ABCD	NO	
<input type="checkbox"/>	5 Course Level	ABCD	NO	
<input type="checkbox"/>	6 Deactivate a Course	ABCDEF	NO	a, b
<input type="checkbox"/>	7 Pre & Co-Requisite	ABCD	NO	a, b
<input type="checkbox"/>	8 Course Content	ABCD	NOP	a, b
<input type="checkbox"/>	9 New Course	ABCDEF	NOPQ	a, b
<input type="checkbox"/>	10a Certificate Program (ug/g) exclusively within existing degree program	ABCDEFHJL	NOQ	a, b, d
<input type="checkbox"/>	10b Certificate Program (ug/g) where degree programs do not exist or where courses are selected across degree programs (12 or more credits)	ABCDEFHIK	NOSR, 6	a, b, d
<input type="checkbox"/>	11a UG Concentration (exceeds 24 credit hours)	ABCDEFGHIK	NO, 5	a, b, d
<input type="checkbox"/>	11b Masters Concentration (exceeds 12 credit hours)	ABCDEFGHIK	NO, 5	a, b, d
<input type="checkbox"/>	11c Doctoral Concentration (exceeds 18 credit hours)	ABCDEFGHIK	NO, 5	a, b, d
<input checked="" type="checkbox"/>	12 Program Requirements	ABCDEF	NO	a, b, d
<input type="checkbox"/>	13 Program Title	ABCDEFGHIK	NO, 5	a, b, c, d
<input type="checkbox"/>	14 Off-Campus Deliver of Existing Program	ABCDEFHJK	NO, 4	a, b, c, d
<input type="checkbox"/>	15 Closed Site Program	ABCDJL	NOT	a, b
<input type="checkbox"/>	16 Program Suspension <sup>9</sup>	ABCDEGJL	NOQ	a, b, c, d
<input type="checkbox"/>	17 Program Termination	ABCDEFHJL	NO, 10	a, b, c, d
<input type="checkbox"/>	18 Degree Program	ABCDEFGHIK	NOQRS, 3,8	a, b, c, d
<input type="checkbox"/>	19 New Center	ABCDEFGH		
<input type="checkbox"/>	20 Other	Varies	Varies	Varies

Box 4: APPROVAL SEQUENCE	APPROVAL SIGNATURES	DATE
A Department	Chair: <i>Deborah Kohl</i>	<i>February 27, 2006</i>
B Final faculty review body within each school	Chair: <i>Margaret J. Potthast</i>	<i>March 13, 2006</i>
C College Dean	Dean: <i>Ray W. Tru</i>	<i>3/15/06</i>
D Provost and Senior Vice President for Academic Affairs	Provost: <i>John M. Kendall</i>	<i>3/20/06</i>
E Curriculum Review Committee (UFS subcommittee)	Chair: <i>John B. C.</i>	<i>3/28/06</i>
F University Faculty Senate	Chair:	
G University Council <sup>11</sup>	Chair:	
H President	President:	
I Board of Regents – approval		
J Board of Regents – notification only		
K MHEC – approval		
L MHEC – notification only		
M Middle States Association notification	Required only if the mission of the University is changed by the action	

Box 5: DOCUMENTATION (check boxes of documents included)					
<input checked="" type="checkbox"/>	N. This Cover Sheet	<input type="checkbox"/>	Q. Full Description/Rationale	<input type="checkbox"/>	T. Contract
<input checked="" type="checkbox"/>	O. Summary Proposal	<input type="checkbox"/>	R. Full 5-page MHEC Proposal	<input type="checkbox"/>	U. Other
<input type="checkbox"/>	P. Syllabus	<input type="checkbox"/>	S. Financial Tables		

1. Approval automatically lapses after two offerings unless permanently approved by Action 9  
Codes: a) Director of Library Services (Langsdale or Law) b) College Dean c) Planning Office d) EMSA
3. Letter of Intent is required by USM at least 30 days before a full proposal can be submitted. Letter of Intent requires only the approval of the dean and the provost and is forwarded to USM by the Office of the Provost.
4. One-page letter to include: Program title & degree/certificate to be awarded; resources requirements; need and demand; similar programs; method of instruction; and oversight and student services \*
5. One-page letter with description and rational \*
6. One or two-page document that describes: centrality to mission; market demand; curriculum design; adequacy of faculty resources; and assurance program will be supported with existing resources. \*
7. Learning objectives, assessment strategies; fit with UB strategic plan
8. Joint Degree Program or Primary Degree Programs require submission of MOU w/ program proposal
9. Temporary suspension of program to examine future direction; time not to exceed two years. No new students admitted during suspension, but currently enrolled students must be given opportunity to satisfy degree requirements.
10. Provide:
  - a. evidence that the action is consistent with UB mission and can be implemented within the existing program resources of the institution.
  - b. proposed date after which no new students will be admitted into the program;
  - c. accommodation of currently enrolled students in the realization of their degree objectives;
  - d. treatment of all tenured and non-tenured faculty and other staff in the affected program;
  - e. reallocation of funds from the budget of the affected program; and
  - f. existence at other state public institutions of programs to which to redirect students who might have enrolled in the program proposed for abolition.
11. University Council *review* (for a recommendation to the President or back to the Provost) shall be limited to curricular or academic policy issues that may potentially affect the University's mission and strategic planning, or have a significant impact on the generation or allocation of its financial resources.

\* Required by MHEC

**DOCUMENT O – SUMMARY PROPOSAL**

College: CLA	Department: Division of Applied Behavioral Sciences	Cost Code:
Contact Person: Dr. John Bates	Phone: 6560	Effective Semester: Fall 2006

**O-1: Briefly describe what is requested:**

Three revisions of the Human Services Administration Master's Degree Program electives are proposed:

1. Elimination of Program Elective Content Area in Recreation for the Disabled.
2. Elimination of Program Elective Content Area in Entrepreneurship.
3. Change in title and course listing of Program Elective Content Area in Counseling Psychology, to Program Elective Content Area in Applied Psychology, comprising the following (existing) courses:  
 APPL 602 Ethical and Legal Issues in the Practice of Psychology  
 APPL 604 Interviewing  
 APPL 612 Human Relations  
 APPL 613 Human Development  
 APPL 664 Geropsychology: Psychosocial Factors

<b>For new courses or changes in existing courses (needed by Registrar):</b>		
New Title:	Title #:	Credits:
Course Abbreviation:		
Old Title:	Title #:	Credits:

**O-2: Set forth the rationale for the proposal:**

Rationale for Revision 1: Courses in this elective area had been offered solely by HSAD program partner, Coppin State University; however, CSU has eliminated all these courses, and UB will not be adding them.

Rationale for Revision 2: MGMT courses in this elective area have been modified such that they no longer are appropriate for inclusion in the HSAD program, or have been deleted altogether. Also, no HSAD students ever have selected this elective area for study.

Rationale for Revision 3: Revisions of course prerequisites and content in the Applied Psychology MS: Counseling Psychology program render the current elective content area inappropriate for Human Services Administration students. The new elective area and configuration of courses will provide psychology coursework more consistent with career needs of human services administrators.

**O-3 Resources Needed: N/A**

	Personnel	Equipment	Expendables	Facility Costs	TOTAL COSTS
Start-up First Year					
Annual Thereafter					

Indicate probable source of additional funds, if needed:

**O-4 Impact including OTS and Library resources (Complete a or b)**

a) Impact was reviewed. All impacted units were contacted and understandings worked out. No unit objects to the proposal as currently submitted. The units contacted were:

UB Division of Applied Behavioral Sciences; CSU Department of Social Sciences

Deborah Kohl  
 Department Chair Signature

February 27, 2006  
 Date

b) Impact was reviewed. All objections were worked out except those documented in attachments. Units contacted were:

\_\_\_\_\_

\_\_\_\_\_

Department Chair Signature

Date