**PROGRAM FOR WHICH CHANGE IS REQUESTED**

**CHANGE BEING REQUESTED**

**Current Program Requirement(s):**

**Proposed Program Requirement(s):**

**RATIONALE FOR PROPOSAL**

|  |  |  |
| --- | --- | --- |
| **IMPACT REVIEW** SIGNATURES (see procedures for authorized signers) | | DATE |
| OTS  No impact  Impact statement attached | CIO or designee: |  |
| Admissions  No impact  Impact statement attached | Director or designee: |  |
| Records  No impact  Impact statement attached | Registrar or designee: |  |

|  |  |  |
| --- | --- | --- |
| **APPROVAL SEQUENCE** APPROVAL SIGNATURES | | DATE |
| 1. Department / Division |  |  |
| 2. General Education Committee  (as appropriate) |  |  |
| 3. Final faculty review body within each  School/ College |  |  |
| 4. College Dean or Designee |  |  |
| 5. UFS (as appropriate) |  |  |
| 6. Provost or Designee |  |  |
| 7. USM (as appropriate)\* |  |  |
| 8. MHEC ((as appropriate)\* |  |  |

\*If a program change is substantive (i.e., it represents a change of more than 1/3 of a program in 5 years), a proposal and state approval is required.