

Clark Atlanta University
Academic Program Proposal Review and Approval Routing Cover Page

Program Title: _____ Level: _____

School: _____ Academic Department: _____

Department Chair: _____ Date of Submission: _____

Proposed Implementation Date: _____ New Program: Yes No

Modality Option: Face to Face Fully Online

Program Revision: _____ Program Elimination: _____

Course Number Course Description
 Course Sequence Other _____

STEP 1	Approval		Signature	Date
	Yes	No		
Department Chair or Designee				
School Curriculum Committee, Chair				
School Dean				
Chief Financial Officer (New Programs Only)				
School Dean's Comments:				

STEP 2	Approval		Signature	Date
	Yes	No		
University Curriculum Committee, Chair				
Curriculum Comm. Chair's Comments:				

STEP 3 _____

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1. **ABSTRACT** (limit to one page or less)

Describe the proposed change; list the initial date of implementation; projected number of students, if applicable; description of primary target audience; projected life of the program (single cohort or ongoing); instructional delivery methods and, if the change involves the initiation of an off-campus site, its complete physical address.

2. **BACKGROUND INFORMATION**

Provide a clear statement of the nature and purpose of the change in the context of the University's mission and goals; evidence of the legal authority for the change (if authorization is required by the governing board or the state); and whether the proposed degree program or similar program is offered on the main campus or at other **approved** off-campus sites. List certificate, diploma, or degree programs which are related to the proposed program(s).

If this is partially or fully online program, please refer to the Clark 2.1 (a (k)0.7 (2 (r)-8p)-11.3)-3.1 ()T2.8
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6. *LIBRARY AND LEARNING RESOURCES*

Describe library and information resources—general as well as specific to the program—

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Academic Program Proposal Form**

PROGRAM: _____ LEVEL: _____

SCHOOL: _____ DEPARTMENT: _____

CHAIRPERSON: _____ DATE OF SUBMISSION: _____

PROPOSED IMPLEMENTATION DATE:

