Proposal for a New Degree Program

I. Information and Rationale

A. Primary Contact Information
   Institution: Choose an item.
   Contact:
   Title:
   Email:
   Telephone:

B. Program Information
   Date of Proposal Submission: Click or tap to enter a date.
   Award Level: Choose an item.
   Award Nomenclature (e.g., BS, MBA):
   Field of Study/Program Title:
   CIP Code (6-digit):

C. Administration of the Program
   Name of Dean and College:
   Name of Department/Division:
   Name of Chairperson:

D. Implementation Information
   Proposed Program Implementation Date: Click or tap to enter a date.
   Anticipated Date of Approval from Institutional Governing Board: Click or tap to enter a date.
   Anticipated Date of ACHE Meeting to Vote on Proposal: Click or tap to enter a date.
   SACSCOC Sub Change Requirement (Notification, Approval, or NA): Choose an item.
   Other Considerations for Timing and Approval (e.g., upcoming SACSCOC review):

E. Concise Program Description
   Include general opportunities for work-based and/or experiential learning, if applicable.
F. Specific Rationale (Strengths) for the Program
List 3 – 5 strengths of the proposed program as specific rationale for recommending approval of this proposal.
1. [Insert Text]
2. [Insert Text]
3. [Insert Text]

List external entities (more may be added) that may have supplied letters of support attesting to the program’s strengths and attach letters with the proposal at the end of this document.
1. [Insert Text]
2. [Insert Text]
3. [Insert Text]

II. Background with Context

A. Student Learning Outcomes
List four (4) to seven (7) of the student learning outcomes of the program.
1. [Insert Text]
2. [Insert Text]
3. [Insert Text]
4. [Insert Text]
5. [Insert Text]
6. [Insert Text]
7. [Insert Text]

B. Similar Programs at Other Alabama Public Institutions
List programs at other Alabama public institutions of the same degree level and the same (or similar) CIP codes. If no similar programs exist within Alabama, list similar programs offered within the 16 SREB states. If the proposed program duplicates, closely resembles, or is similar to any other offerings in the state, provide justification for any potential duplication.

<table>
<thead>
<tr>
<th>CIP Code</th>
<th>Degree Title</th>
<th>Institution with Similar Program</th>
<th>Justification for Duplication</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Relationship to Existing Programs within the Institution

1. Is the proposed program associated with any existing offerings within the institution, including options within current degree programs?
   - Yes ☐  No ☐
   (Note: Most new programs have some relationship to existing offerings, e.g., through shared courses or resources). If yes, complete the following table. If this is a graduate program, list any existing undergraduate programs which are directly or indirectly related. If this is a doctoral program, also list related master's programs.

<table>
<thead>
<tr>
<th>Related Degree Program Level</th>
<th>Related Degree Program Title</th>
<th>Explanation of the Relationship Between the Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Will this program replace any existing programs or specializations, options, or concentrations?
   - Yes ☐  No ☐
   If yes, please explain.

3. Will the program compete with any current internal offerings?
   - Yes ☐  No ☐
   If yes, please explain.

D. Collaboration

- Have collaborations with other institutions or external entities been explored?
  - Yes ☐  No ☐
  If yes, provide a brief explanation indicating those collaboration plan(s) for the proposed program.

- Have any collaborations within your institution been explored?
  - Yes ☐  No ☐
  If yes, provide a brief explanation indicating those collaboration plan(s) for the proposed program.

E. Specialized Accreditation

1. Will this program have any external accreditation requirements in addition to the institution's SACSCOC program requirements?
   - Yes ☐  No ☐
   If yes, list the name(s) of the specialized accrediting organization(s) and the anticipated timeframe of the application process.
2. Does your institution intend to pursue any other non-required accrediting organizations for the program?*  
   Yes ☐ No ☐  
   If yes, list the name(s) of the organization(s) and the purpose of the pursuit.

   If there are plans to pursue non-required external accreditation at a later date, list the name(s) and why the institution is not pursuing them at this time.

   Note: Check No to indicate that non-required external accreditation will not be pursued, which requires no explanation.

F. Professional Licensure/Certification  
   Please explain if professional licensure or industry certification is required for graduates of the proposed program to gain entry-level employment in the occupations selected. Be sure to note which organization(s) grants licensure or certification.

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

H. Admissions  
   Will this program have any additional admissions requirements beyond the institution’s standard admissions process/policies for this degree level?  
   Yes ☐ No ☐  
   If yes, describe any other special admissions or curricular requirements, including any prior education or work experience required for acceptance into the program.

I. Mode of Delivery  
   Provide the planned delivery format(s) (i.e., in-person, online, hybrid) of the program as defined in policy along with the planned location(s) at which the program will be delivered (i.e., on-campus and/or at specific off-campus instructional site(s)). Please also note whether any program requirements can be completed through competency-based assessment.

J. Projected Program Demand (Student Demand)  
   Briefly describe the primary method(s) used to determine the level of student demand for this program using evidence, such as enrollments in related coursework at the institution, or a survey of student interest conducted (indicate the survey instrument used), number and percentage of respondents, and summary of results.
K. Standard Occupational Code System

Using the federal Standard Occupational Code (SOC) System, indicate the top three occupational codes related to post-graduation employment from the program. A full list of SOCs can be found at [https://www.onetcodeconnector.org/find/family/title#17](https://www.onetcodeconnector.org/find/family/title#17).

A list of Alabama’s In-Demand Occupations is available at [https://www.ache.edu/index.php/policy-guidance/](https://www.ache.edu/index.php/policy-guidance/).

SOC 1 (required):

SOC 2 (optional):

SOC 3 (optional):

Briefly describe how the program fulfills a specific industry or employment need for the State of Alabama. As appropriate, discuss alignment with Alabama’s Statewide or Regional Lists of In-Demand Occupations ([https://www.ache.edu/index.php/policy-guidance/](https://www.ache.edu/index.php/policy-guidance/)) or with emerging industries as identified by Innovate Alabama or the Economic Development Partnership of Alabama (EDPA).
III. Curriculum Information for Proposed Degree Program

A. Program Completion Requirements: Enter the credit hour value for all applicable components (enter N/A if not applicable).

<table>
<thead>
<tr>
<th>Curriculum Overview of Proposed Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credit hours required in general education</td>
</tr>
<tr>
<td>Credit hours required in program courses</td>
</tr>
<tr>
<td>Credit hours in program electives/concentrations/tracks</td>
</tr>
<tr>
<td>Credit hours in free electives</td>
</tr>
<tr>
<td>Credit hours in required research/thesis</td>
</tr>
<tr>
<td>Total Credit Hours Required for Completion</td>
</tr>
</tbody>
</table>

Note: The above credit hours MUST match the credit hours in the Curriculum Components of Proposed Program table in Section V.G.

B. Maximum number of credits that can be transferred in from another institution and applied to the program:

C. Intended program duration in semesters for full-time students:

D. Intended program duration in semesters for part-time students:

E. Does the program require students to demonstrate industry-validated skills, specifically through an embedded industry-recognized certification, structured work-based learning with an employer partner, or alignment with nationally recognized industry standards? Yes ☐ No ☐
   If yes, explain how these components fit with the required coursework.

F. Does the program include any concentrations? Yes ☐ No ☐
   If yes, provide an overview and identify these courses in the Electives/Concentrations/Tracks section in the Curriculum Components of Proposed Program Table in Section V.G.
G. Please provide all course information as indicated in the following table. Indicate new courses with “Y” in the associated column. If the course includes a required work-based learning component, such as an internship or practicum course, please indicate with a “Y” in the WBL column.

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
<th>New? (Y)</th>
<th>WBL? (Y)</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Education Courses <em>(Undergraduate Only)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Courses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Electives/Concentrations/Tracks</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research/Thesis</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: The total credit hours should equal the total credit hours in the Curriculum Overview table (V.B, p. 9).*
IV. Program Resource Requirements

A. Proposed Program Faculty*

*Note: Institutions must maintain and have current as well as additional faculty curriculum vitae available upon ACHE request for as long as the program is active, but CVs are not to be submitted with this proposal.

<table>
<thead>
<tr>
<th>Current Faculty</th>
<th></th>
<th></th>
<th>ACADEMIC DEGREES and COURSEWORK Relevant to Courses Taught, including Institution and Major; List Specific Graduate Coursework, if needed</th>
<th>OTHER QUALIFICATIONS and COMMENTS Related to Courses Taught and Modality(ies) (IP, OL, HY, OCIS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CURRENT F AcatlUETY NAME (FT, PT)</td>
<td>COURSES TAUGHT including Term, Course Number, Course Title, &amp; Credit Hours (D, UN, UT, G, DU)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Additional Faculty (To Be Hired)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
</tbody>
</table>

Abbreviations: (FT, PT): Full-Time, Part-Time; (D, UN, UT, G, DU): Developmental, Undergraduate Nontransferable, Undergraduate Transferable, Graduate, Dual: High School Dual Enrollment Course Modality: (IP, OL, HY, OCIS): In-Person, Online, Hybrid, Off-Campus Instructional Site Courses Taught/To be Taught – For a substantive change prospectus/application, list the courses to be taught, not historical teaching assignments.
B. All Proposed Program Personnel

Provide all personnel counts for the proposed program.

<table>
<thead>
<tr>
<th>Employment Status of Program Personnel</th>
<th>Personnel Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Count from Proposed Program Department</td>
</tr>
<tr>
<td>Current</td>
<td></td>
</tr>
<tr>
<td>Full-Time Faculty</td>
<td></td>
</tr>
<tr>
<td>Part-Time Faculty</td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td></td>
</tr>
<tr>
<td>Support Staff</td>
<td></td>
</tr>
<tr>
<td><strong>New To Be Hired</strong></td>
<td></td>
</tr>
<tr>
<td>Full-Time Faculty</td>
<td></td>
</tr>
<tr>
<td>Part-Time Faculty</td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td></td>
</tr>
<tr>
<td>Support Staff</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Any new funds designated for compensation costs (Faculty (FT/PT), Administration, and/or Support Staff to be Hired) should be included in the New Academic Degree Program Business Plan Excel file. Current personnel salary/benefits (Faculty (FT/PT), Administration, and/or Support Staff) should not be included in the Business Plan.

Provide justification that the institution has proposed a sufficient number of faculty (full-time and part-time) for the proposed program to ensure curriculum and program quality, integrity, and review.

C. Equipment

Will any special equipment be needed specifically for this program?  Yes ☐ No ☐

If yes, list the special equipment. Special equipment cost should be included in the New Academic Degree Program Business Plan Excel file.

D. Facilities

Will any new facilities be required specifically for the program?  Yes ☐ No ☐

If yes, list only new facilities. New facilities cost should be included in the New Academic Degree Program Business Plan Excel file.

Will any renovations to any existing infrastructure be required specifically for the program?  Yes ☐ No ☐

If yes, list the renovations. Renovation costs should be included in the New Academic Degree Program Business Plan Excel file.
E. Assistantships/Fellowships

Will the institution offer any assistantships specifically for this program? Yes ☐ No ☐

If yes, how many assistantships will be offered?

The expenses associated with any new assistantships should be included in the New Academic Degree Program Business Plan Excel file.

F. Library

Provide a brief summarization (one to two paragraphs) describing the current status of the library collections supporting the proposed program.

Will additional library resources be required to support the program? Yes ☐ No ☐

If yes, briefly describe how any deficiencies will be remedied, and include the cost in the New Academic Degree Program Business Plan Excel file.

G. Accreditation Expenses

Will the proposed program require accreditation expenses? Yes ☐ No ☐

If yes, briefly describe the estimated cost and funding source(s) and include cost in the New Academic Degree Program Business Plan Excel file.

H. Other Costs

Please explain any other costs to be incurred with program implementation, such as marketing or recruitment costs. Be sure to note these in the New Academic Degree Program Business Plan Excel file.

I. Revenues for Program Support

Will the proposed program require budget reallocation? Yes ☐ No ☐

If yes, briefly describe how any deficiencies will be remedied and include the revenue in the New Academic Degree Program Business Plan Excel file.

Will the proposed program require external funding (e.g., Perkins, Foundation, Federal Grants, Sponsored Research, etc.)? Yes ☐ No ☐

If yes, list the sources of external funding and include the revenue in the New Academic Degree Program Business Plan Excel file.

Please describe how you calculated the tuition revenue that appears in the New Academic Degree Program Business Plan Excel file. Specifically, did you calculate using cost per credit hour or per term? Did you factor in differences between resident and non-resident tuition rates?
New Academic Degree Program Summary/Business Plan

Use the Excel form from ACHE’s Academic Program webpage located at https://www.ache.edu/index.php/forms/, named New Academic Degree Program Business Plan, to complete the New Academic Program Degree Proposal.

Instructions and definitions are provided in the Excel file. The New Academic Degree Program Business Plan should be uploaded as an Excel file (.xlsx) in the Academic Program Review (APR) Portal.

Steps for Submitting the New Academic Degree Proposal

2. Attach the letters of support from external entities listed in Section I.D. at the end of the New Academic Degree Proposal document.
5. Login to the Academic Program Review (APR) Portal at apr.ache.edu using your ACHE-provided login information. If you are not a designated user for your institution, contact your designated user.
6. Provide responses to questions in the APR Portal.
9. Click to “Validate” the proposal and then address any issues with your submission.
10. Once validation is clear, click “Review” to check your responses before submitting. If all looks good, click “Submit” at the bottom of the review screen.
11. The system will then prompt you to “Lock” the submission. Your proposal is considered submitted only once it has been locked within the APR Portal.

NOTE: Proposals that have not been locked by the deadline will not be reviewed for consideration of inclusion on the next Commission agenda.