

CONNECTICUT BOARD OF REGENTS FOR HIGHER EDUCATION
APPLICATION FOR NEW PROGRAM APPROVAL (Public Higher Education Institutions) - 01/20/12

SECTION 1: GENERAL INFORMATION

Institution:	Date of Submission to BOR Office:
Most Recent NEASC Institutional Accreditation Action and Date:	
Program Characteristics Name of Program: Degree: Title of Award (e.g. Master of Arts) Certificate: (specify type and level) Anticipated Program Initiation Date: Anticipated Date of First Graduation: Modality of Program: On ground Online Combined If "Combined", % of fully online courses? Total # Cr the Institution Requires to Award the Credential (i.e. include program credits, GenEd, other):	Program Credit Distribution # Cr in Program Core Courses: # Cr of Electives in the Field: # Cr of Free Electives: # Cr Special Requirements (include internship, etc.): <u>Total # Cr in the Program</u> (sum of all #Cr above): From "Total # Cr in the Program" above, enter #Cr that are part of/belong in an already approved program(s) at the institution:
Type of Approval Action Being Sought:	Licensure OR Licensure and Accreditation
Suggested CIP Code No. (optional)	Title of CIP Code
If establishment of the new program is concurrent with discontinuation of related program(s), please list for each program: Program Discontinued: CIP: DHE# (if available): Accreditation Date: Phase Out Period Date of Program Termination	
Institution's Unit (e.g. School of Business) and Location (e.g. main campus) Offering the Program:	
Other Program Accreditation:	
<ul style="list-style-type: none"> • If seeking specialized/professional/other accreditation, name of agency and intended year of review: • If program prepares graduates eligibility to state/professional license, please identify: (As applicable, the documentation in this request should address the standards of the identified accrediting body or licensing agency)	
Institutional Contact for this Proposal:	Title: Tel.: e-mail:

BOR REVIEW STATUS (For Office Use Only - please leave blank)

BOR Sequence Number (to be assigned):	
Approved 2010 CIP Code No. ¹	Title of CIP Code
Log of BOR Steps Towards Program Approval:	
Nature and Resolution number for BOR Approval:	Date of Approval:
Conditions for Approval (if any)	

¹ Final CIP assignment will be done by BOR staff in consideration of suggested number (if provided) and in consultation with academic offices at the institution and system proposing the program. For the final assignment, the 2010 CIP definitions will be used.

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SECTION 2: PROGRAM PLANNING ASSESSMENT (To be Used for BOR Review Only)

Alignment of Program with Institutional Mission, Role and Scope

(Please provide objective and concise statements)

Addressing Identified Needs

- How does the program address CT workforce needs and/or the wellbeing of CT society/communities? *(Succinctly present as much factual evidence and evaluation of stated needs as possible)*
- How does the program make use of the strengths of the institution (e.g. curriculum, faculty, resources) and of its distinctive character and/or location?
- Please describe any transfer agreements with other institutions under the BOR that will become instituted as a result of the approval of this program *(Please highlight details in the Quality Assessment portion of this application, as appropriate)*
- Please indicate what similar programs exist in other institutions within your constituent unit ², and how unnecessary duplication is being avoided
- Please provide a description/analysis of employment prospects for graduates of this proposed program

Cost Effectiveness and Availability of Adequate Resources

(Please provide a one-paragraph narrative on the attached MSExcel Pro-Forma Budget)

² Constituent units are: the Connecticut Community College System, the Connecticut State University System, Charter Oak State College, and the University of Connecticut

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SECTION 3: PROGRAM QUALITY ASSESSMENT

Learning Outcomes - L.O. *(Please list up to seven of the most important student learning outcomes for the program and concisely describe assessment methodologies to be used in measuring the outcomes. If the program will seek external accreditation or qualifies graduates to opt for a professional/occupational license, please frame outcomes in attention to such requirements. With as much detail as possible, please map these learning outcomes to courses listed under the "Curriculum" section of this application)*

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Program Administration *(Describe qualifications and assigned FTE load of administrator/faculty member responsible for the day-to-day operations of the proposed academic program. Identify individual for this role by name or provide time frame for prospective hiring)*

Faculty *(Please complete the faculty template provided below to include current full-time members of the faculty who will be teaching in this program and, as applicable, any anticipated new positions/hires during the first three years of the program and their qualifications)*

How many new full-time faculty members, if any, will need to be hired for this program?

What percentage of the credits in the program will they teach?

What percent of credits in the program will be taught by adjunct faculty?

Describe the minimal qualifications of adjunct faculty, if any, who will teach in the program

Special Resources *(Provide a brief description of resources that would be needed specifically for this program and how they will be used, e.g. laboratory equipment, specialized library collections, etc. Please include these resources in the Resources and Cost Analysis Projection sheet for BOR review)*

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Curriculum

*(Please list courses for the proposed program, including the core/major area of specialization, prerequisites, electives, required general education courses (undergraduate programs), etc. Using numerals, map the Learning Outcomes listed in the previous section to relevant program courses in this table. Mark any new courses with an asterisk * and attach course descriptions. Mark any courses that are delivered fully online with a double asterisk ** Please modify this format as needed)*

Course Number and Name	L.O. # ³	Pre-Requisite	Cr Hrs	Course Number and Name	L.O. #	Cr Hrs
Program Core Courses				Other Related/Special Requirements		
Core Course Prerequisites				Elective Courses in the Field		
Total Other Credits Required to Issue Credential (e.g. GenEd/Liberal Arts Core/Liberal Ed Program)						
<p>Program Outline <i>(Please provide a summary of program requirements including total number of credits for the degree, special admission requirements, capstone or special project requirements, etc. Indicate any requirements and arrangements for clinical affiliations, internships, and practical or work experience. Example: "The Finance Major entails 18 credits of Related Course requirements from a range of disciplines (6 credits of which apply to the Liberal Arts Core (LAC), or institution's GenEd program), 24 credits of courses in Business (3 credits of which apply to the LAC/GenEd), 18 credits of coursework in Finance (including a 6-credit internship), and 9 elective credits from a list that includes courses in Economics, Finance, and Business. Students must take a minimum of 24 credits of coursework for the major at the institution and must maintain a GPA of 2.5.")</i></p>						

³ From the Learning Outcomes enumerated list provided at the beginning of Section 3 of this application

