Academic Policies and Procedures Committees PROPOSAL FORM -- Part A

| Graduate AP&P | Department/Program Proposal # |
|--|---|
| Undergraduate AP&P | |
| Both (Dual-Listed Courses) Submit simultaneously | Proposed Effective Date: FALL (year) |
| College/Unit Assoc. I | Dean Proposer(s) |
| Department/Program | Chair |
| 1. I want to: | Briefly describe the action(s) requested: |
| 2. Rationale for this request: | |
| 3. Course additions, deletions or chang a. Current Bulletin copy: | es. |
| b. Proposed Bulletin copy; be sure to inc | ude <u>all prerequisites</u> : |
| | |

4. Required Attachments:

- For changes to existing programs of study or policies: marked up current Bulletin copy showing revisions.
- For new programs of study or policies: proposed bulletin copy and AP&P Form B.
- For <u>new courses</u>: a syllabus and AP&P Form B.

Ver 5/3/2023 jlh Part A, Page 1 of 3

5. Contact and share the proposal with the **Registrar's Office** and (for graduate proposals) the **Graduate School** early in the proposal development.

| • | Area | Person Contacted | Review Comments | Date of Comments m/d/yyyy |
|---|--------------------|------------------|-----------------|------------------------------|
| | Registrar's Office | | | |
| | Graduate School | | | |

| 6. | For | Course and | l Program | of Study | changes | and | additions: |
|---------|------|------------|------------|----------|-----------|-----|------------|
| \cdot | 1 01 | Course and | LITOSIAIII | or Study | ciiuiiges | unu | additions. |

a. Search the current online bulletin for courses and programs of study affected by this proposed change, including any in your own department. List each course and program in the appropriate table below or, if applicable, choose none. Attach a separate list if necessary.

| | Course(s) Affected | |
|------|--------------------|--|
| None | (number & title) | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Program(s) Of Study Affected | | | |
|------------------------------|------------------------|--|--|
| None | (program code & title) | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

b. List all affected **department chairs/program directors** (including those from 6a as well as those whose programs may be impacted in ways other than listed above) who have been consulted in the development of this proposal and their response in support or opposition to the proposal. Use of another unit's course requires approval from that unit.

| Name | Department/Program | Response | Date of Response m/d/yyyy |
|------|--------------------|----------|------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

7. List the **committees, councils, and other groups** that have considered this proposal; the action taken; and the date that action was taken. For courses or programs administered by multiple departments and/or colleges (cross-listed, dual-degree, etc.), use the blank lines to record actions for all impacted units. Note that all of the above consultations should occur <u>before</u> submission to the school or college council.

| Area | Action | | | Date of Action | |
|--|----------|-----------------|-------------------|----------------|--|
| Aita | approved | not approved | not applicable | m/d/yyyy | |
| Department/Program Faculty (undergraduate) | | | | | |
| Department Graduate Faculty (graduate) | | | | | |
| 2nd Department (dual-degree or cross-listed) | | | | | |
| College Council(s) | | | | | |
| 2nd College Council (dual-degree or cross-listed) | | | | | |
| General Education Council | | | | | |
| Professional Education Council | | | | | |
| Departmental Honors Program Council | | | | | |
| Honors College Council | | | | | |
| Undergraduate Academic Policies & Procedures Committee | | | | | |
| Graduate Academic Policies & Procedures Committee | | | | | |

Ver 5/3/2023 jlh Part A, Page 2 of 3

| 8. | If a policy change or deletion is requested, li List the person(s) and date contacted and the | | ho were consulted in dev | relopment of this proposal. |
|----|--|--|-----------------------------------|---|
| 9. | Course Equivalency. If changing a course Banner? yes no n/a (!f yes, ! | | | e proposed course equivalent to an existing course in below) |
| | Existing Course | Proposed Course | | |
| | Course designations and compliance requal a. General Education. Check one. | irements . Please review | w the following. | |
| | The proposal requests the <u>addit</u> to the Office of General Educat | | | ing course. Submit AP&P proposal form Part C |
| | The proposal impacts an existing action is needed; indicate the p | | | of General Education to determine if other |
| | Does not apply. | | | |
| | b. Experiential learning in courses other to Teaching. Check all that apply. | han established courses | with schedule type: Inte | rnship, Practicum, Field Experience, Clinical, or Student |
| | these courses, a person with the | e appropriate credentials ontact the Office of Ger | s must be assigned super | vices or advice to community members. Note that in visory responsibility and the liability insurance e if other action is needed; indicate the person |
| | | eed to complete addition | nal training and provide | nteract with minors. Note that in these courses, additional materials. Contact Conference and Event |
| | Does not apply. | | | |
| | c. Significant changes to content, locatio | n or mode of instructi | ion. Check <u>all</u> that apply. | |
| | | tion. Additional accredit | itation documentation ma | n of more than 25% new content not offered by any ay be required. Contact the SACSCOC Liaison; |
| | | ation documentation m | nay be required. Contac | es the amount of <u>online</u> content to 50% or <u>more</u> of the t the SACSCOC Liaison and the Director of State nse, and the date: |
| | | | | r than on the main campus, either fully or partially in cate the person contacted, their response, and the date: |
| | None of the above. | | | |

Ver 5/3/2023 jlh Part A, Page 3 of 3

Academic Policies and Procedures Committees PROPOSAL FORM -- Part B (For additions only)

| S | ELECT ONE: Course aa |
|----|--|
| 1. | If this is a new course, |
| | a. Has it been offered as Selected Topics in the last five years? yes no If so, how often and what were the enrollments each semester it was offered? |
| | b. Are there courses from other departments that may cover or partially cover the subject matter of the proposed new course? yes no (If yes, list course numbers and titles:) |
| 2. | Projected enrollment: 1st year 2nd year |
| 3. | Projected student clientele: |
| 4. | Faculty: a. Additional faculty needed: |
| | b. Names of current faculty qualified to teach the course: |
| | c. Other and continuing responsibilities of current faculty involved in new degree or course: |
| 5. | a. For a new degree, attach the <i>Request for Preliminary Authorization</i> submitted to UNC System Office. |
| | b. For a new graduate certificate program, attach the <i>Proposing a New Graduate Certificate</i> form.c. For a new undergraduate certificate program, attach an explanation of the career and/or graduate education opportunities available to students. |
| | d. Does this new program lead to professional licensure or certification? If so, please describe the license or certificate. |
| 6. | List estimated costs of the new program or course that cannot be covered by the present budget: |

Ver 5/3/2023 jlh Part B, Page 1 of 2

AP&P PROPOSAL FORM -- Part B (continued)

| | That The OSALT ONLY Ture b (continued) |
|------------|---|
| 7. thei | Contact your library liaison to assure adequate library resources are or will be available. List the date, person contacted, and ir response. (Click here for a list of Library Liaisons.) |
| 8. | Contact the appropriate dean(s) affected by the development of this proposal to assure adequate resources are or will be available. List the date(s), person(s) contacted, and their response(s). |
| 9. | For a new degree or certificate only, consult Institutional Research, Assessment, and Planning (IRAP) to develop functional learning goals and outcomes. Attach the goals and outcomes to be published on IRAP's website. List the date, person contacted, and their response. Examples of outcomes are found here. |
| 10. | For new course, select schedule type: |
| | |

Ver 5/3/2023 jlh Part B, Page 2 of 2