DEGREE/PROGRAM CHANGE FORM C

Fields marked with * are required Name of Initiator: Sarah Lentz Email:*slentz@unm.edu Date:* 09-15-08
Phone Number:* 505 277-2737 Initiator's Rank / Title* Dept Administrator 2: Theatre and
Dependent Depend
Faculty Contact* Donna Jewell Administrative Contact* Sarah Lentz
Department* Theatre and Dance
Division 100 Program Graduate Degree Programm
Branch 186
Proposed effective term:
Semester Fall Vear 2009 V
Course Information
Select Appropriate Program Graduate Degree Program CIP Code
Name of New or Existing Program * MFA in Dance
Catalog Page Number 502 Select Category Major Degree Type MFA
Select Action Revision
Exact Title and Requirements as they should appear in the catalog.
See current catalog for format within the respective college (enter text below or upload a doc/pdf file)
Form C MEA doc

This Change affects other departmental program/branch campuses

Reason(s) for Request * (enter text below or upload a doc/pdf file)

Form C MFA Reasons for Request.doc

Statements to address budgetary and Faculty Load Implications and Long-range planning

* (enter text below or upload a doc/pdf file)