DEGREE/PROGRAM CHANGE FORM C

Fields marked with * are required Name of Initiator: Cynthia Salas Email:* Casalas@unm.edu Date:* 11-04-08 Phone Number:* 505 277-4318 Initiator's Rank / Title* Dept Administrator II: Individual Family Comm Educ
Faculty Contact* Lydia Coffield Administrative Contact* Cynthia Salas Department* Individual, Family & Community Edu Individual, Family & Community Edu Individual, Family & Community Edu Division COE Program Counselor Education Branch Counselor Education
Proposed effective term: Semester Spring Vear 2009 V
Course Information
Select Appropriate Program Graduate Degree Program CIP Code Name of New or Existing Program * MA Counseling Catalog Page Number 323 Select Category Concentration Degree Type MA Select Action Deletion Image: Concentration in the second se
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) On p 324 under "Graduate Program" and "The Masters Degree in Counseling" the word "concentration" should read "areas of focus". See attachment Counselor Education form c revision.doc
This Change affects other departmental program/branch campuses
Reason(s) for Request * (enter text below or upload a doc/pdf file) They were mistakenly identified as concentrations in the curriculum terminology standardization process. This form is intended to correct this. There is only a one course difference between them

Statements to address budgetary and Faculty Load Implications and Long-range planning This is only a wording change there is no budgetary or faculty load implication.

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