DEGREE/PROGRAM CHANGE FORM C

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Phone Number	: * 277-4161	Initiator's F	ank / Title*	ADMINISTRATIVE CO	ORDINATOR: A	Anderson Schools of M	Management
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	Faculty Contact	, ,	0		Admi	nistrative Contact*	Bobbie Murray
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Reason(s) for Request * (enter text below or upload a doc/pdf file) Expedited Form C requested by E. Barton 12/11/08.

Statements to address budgetary and Faculty Load Implications and Long-range planning *(enter text below or upload a doc/pdf file) Expedited Form C requested by E. Barton 12/11/08. There are no budgetary, faculty load implications or long-range planning matters affected by this request.