

**DEGREE/PROGRAM CHANGE
FORM C
Form Number: C2526**

Fields marked with * are required

Name of Initiator: Stephen Bishop **Email:** sbishop@unm.edu **Phone Number:** 505 277-6344 **Date:** 09-19-2019

Associated Forms exist? Initiator's Title Faculty Contact Administrative Contact Department Admin Email Branch Admin Phone

Proposed effective term

Semester Year

Course Information

Select Appropriate Program Name of New or Existing Program Select Category Degree Type Select Action

Exact Title and Requirements as they should appear in the catalog. If there is a change, upload current and proposed requirements.
See current catalog for format within the respective college (upload a doc/pdf file)

[Changes renaming.docx](#)

☐ **Does this change affect other departmental program/branch campuses? If yes, indicate below.**

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

The justification for the changes is that the current thematic area options are unnecessarily wordy, which has both confused students and taken up extra space in advertising materials.

Upload a document that inlcudes justification for the program, impact on long-range planning, detailed budget analysis and faculty workload implications.(upload a doc/pdf file)

[Implications of renaming.docx](#)

☐ **Are you proposing a new undergraduate degree or new undergraduate certificate? If yes, upload the following documents.**

Upload a two-page Executive Summary authorized by Associate Provost. (upload a doc/pdf file)

Upload memo from Associate Provost authorizing go-ahead to full proposal. (upload a doc/pdf file)