

**DEGREE/PROGRAM CHANGE
FORM C
Form Number: C2007**

Fields marked with * are required

Name of Initiator: Kathleen Head **Email:** khead@unm.edu **Phone Number:** 505 863-7690 **Date:** 11-30-2016

Associated Forms exist? Yes Initiator's Title Interim Chair of Arts and Sciences
Faculty Contact John Zimmerman Administrative Contact Monica Wyaco
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Branch Gallup Admin Phone (505)863-7700

Proposed effective term

Semester Fall Year 2018

Course Information

Select Appropriate Program Undergraduate Degree Program
Name of New or Existing Program AS Science (GA)
Select Category Degree Degree Type Associate
Select Action Revision

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)

[AS in Science \(003\).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)
Please see attached file.

[Needs Analysis AS in Science.docx](#)

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

[Justification for new Associate of Science in Science Degree.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)