Office of the Registrar Log Out Comment/Bug Rep		Log Out Comment/Bug Report Help
Forms		search
Current user: rickh / Comments (Curriculum Workflow	(10) / Form Transaction Log	
		-
	DEGREE/PROGRAM CHANGE FORM C	
Fields marked with * are required Name of Faculty Member Initiating Form: Lo Phone Number:* 505 277-7244 Initiate Faculty Contact**	bis Meyer Email:*Ismeyer@unm.edu Date:* 10- or's Rank / Title** Associate Professor: Language Li Administrative Contact**	
Departme	ent** LLSS	
Division	P	rogram Bilingual/ESL
Branch		
Semester Fall Year 2007	Course Information	
Select Appropriate Program* Graduate De Name of New or Existing Program* * Bilingu Catalog Page Number 347 Select Category *	al Education (Spanish and Indigenous Languages)	
Select Action Revision		
Exact Title and Requirements as they show See current catalog for format within the resp	uld appear in the catalog. ective college (enter text below or upload a doc/pdf fil	e)
Form C MA Bilingual program.doc REVISED Form C MA Bilingual program.doc		
This Change affects other departmenta	al program/branch campuses	
Reason(s) for Request * * (enter text below o This revision adds several additional electives	r upload a doc/pdf file) s that expand and enrich the optional offerings under	our MA concentrations.
	Ity Load Implications and Long-range planning* (as are taught regularly within our department and progon. No new courses are being added.	
Approve and Sign Off	Send back to Initiator (Lois Meyer) Comment on this Form	Committee Review

Office of the Registrar MSC06 3650 1 University of New Mexico Albuquerque, 87131-0001 Ph: (505) 277-8466 | Fax: (505) 277-7741 , Email: regcurr@unm.edu