

**DEGREE/PROGRAM CHANGE
FORM C
Form Number: C2389**

Fields marked with * are required

Name of Initiator: Krista Savoca **Email:** atsirk@unm.edu **Phone Number:** 505 277-2067 **Date:** 10-30-2018

Associated Forms exist?

Yes

Initiator's Title Associate Director for Program Development

Faculty Contact Ronda Brulotte

Administrative Contact Krista Savoca

Department Latin American Studies

Admin Email atsirk@unm.edu

Branch

Admin Phone 505.277.7044

Proposed effective term

Semester

Fall

Year

2019

Course Information

Select Appropriate Program

Undergraduate Degree Program

Name of New or Existing Program BA Latin American Studies

Select Category

Major

 Degree Type BA

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)

[LTAM UG Catalog Changes 18.10.08.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)
This does not affect other departmental programs nor branch campuses.

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)

[LTAM 360_Program Changes Justification.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)