

**DEGREE/PROGRAM CHANGE
FORM C
Form Number: C2265**

Fields marked with * are required

Name of Initiator: Pamela Sedillo **Email:** psedill1@unm.edu **Phone Number:** 505 272-1917 **Date:** 09-26-2018

Associated Forms exist? No Initiator's Title Student Success Manager
Faculty Contact Kristine Tollestrup Administrative Contact Pamela Sedillo
Department College of Population Health Admin Email psedill1@salud.unm.edu
Branch Admin Phone 272-1917

Proposed effective term

Semester Fall Year 2019

Course Information

Select Appropriate Program Undergraduate Degree Program
Name of New or Existing Program BS Population Health (HSC)
Select Category Major Degree Type Bachelor
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)

[Form C BSPH Degree Requirements 9.18.pdf](#)

☐ **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)

Adjusting catalog entry based on the UNM core changes to meet the bachelor total credits and core requirements.

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)

[BSPH degree requirement 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)