

**DEGREE/PROGRAM CHANGE
FORM C**

Fields marked with * are required

Name of Initiator: Beverly Burris

Email: * bburris@unm.edu

Date: * 04-03-09

Phone Number: * 505 277-5611

Initiator's Rank / Title* Chairperson: Sociology
Department

Faculty Contact* Beverly Burris

Administrative Contact* Dorothy Esquivel

Department* Sociology

Division A&S

Program Undergraduate

Branch Main

Proposed effective term:

Semester Fall ▼ Year 2009 ▼

Course Information

Select Appropriate Program Undergraduate Degree Program ▼ CIP Code

Name of New or Existing Program * B.A. Education in Sociology

Catalog Page Number Select Category Degree ▼ Degree Type Undergraduate

Select Action Deletion ▼

Exact Title and Requirements as they should appear in the catalog.

See current catalog for format within the respective college (enter text below or upload a doc/pdf file)

This Change affects other departmental program/branch campuses

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

This is a degree program that has not enrolled any students for at least 5 years and should be eliminated.

Statements to address budgetary and Faculty Load Implications and Long-range planning * (enter text below or upload a doc/pdf file)

Since this degree program is non functional, it will have no budgetary or faculty load implications.