**PROGRAM AMENDMENT FORM**

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| **Date:**  | **Department:**  |
| **Current Program Name:**  | **Current Program Director:**  |
| **Degree Type:**  | **Person completing the form:**  |
| **Last Program Review Approval Date:**  | **Curriculum Committee Rep:** |

**Use this form to record the following updates to Degree Programs:**

Change of Director, program description for clarity or style, typographical corrections, program faculty, and non-substantive edits to program competencies or webpage language for clarity (no change in meaning), change in elective options with no change in required courses, alignment of program codes or titles with other systems (e.g., Banner), discontinuation of existing programs/certificates and semester(s) offered. Signed curriculum records are the definitive source for program information of any kind and should be updated as needed for accurate web, Banner, SOPHAS, publications, syllabi. **All other requests require full CC review.**

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| **Type of Program Change** | **From** | **To** | **Explanation** |
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**Department Chair – Date Program Director – Date Curriculum Committee Chair – Date**