|  |
| --- |
| **Directions:** The **Double Major (Existing Program) Change Request Form** is to be used to a) delete OR b) change (increase/decrease) the semester credit hours (SCH) of an existing Double Major program OR c) propose a new Double Major (Major 1 + Major 2) using two existing degree programs. **Note:**  For analytical support regarding justification, contact [Program Analytics Request](https://shsu.co1.qualtrics.com/jfe/form/SV_cIK2OfvaXYoAZzU). **Assistance:** Contact the Office of Academic Planning and Program Development at (936) 294-2291.**University Curriculum Committee**: [Belonging Resources Statement](#_5._*" \o " The pursuits of excellent teaching and fostering a campus environment that welcomes a wide range of perspectives are intertwined and integral to achieving Sam Houston State University’s mission of providing high-quality education, scholarship, and service for our regional, state, national, and international constituencies. Diversified curriculum helps to ensure that every student and faculty member has a chance to reach their full professional potential and be a fully enfranchised member of the university community. Faculty seeking to develop new courses and curriculum initiatives are encouraged to consider their diverse audiences and to visit the UCC website for curricular design recommendations, suggestions, and examples.)*\* Asterisk denotes headers with directional information.* |

 **SAM HOUSTON STATE UNIVERSITY
DOUBLE MAJOR (EXISTING PROGRAMS) CHANGE REQUEST FORM**

|  |
| --- |
| **Change Requested** [ ] Increase/Decrease SCH Double Major[ ]  Delete Double Major [ ] Create Double Major  |

[ ]  **Change Semester Credit Hours (Increase/Decrease)**

*Complete this portion of the form to request a change in the number of semester credit hours (SCH) required for an existing double major degree program already on SHSU’s program* inventory.

1. Revisions that **reduce** the number of SCH require notifications of change and affirmation that the reduction does not fall below the minimum requirements of the Southern Association of Colleges and Schools Commission on Colleges, program accreditors, and licensing bodies, if applicable.
2. Revisions that **increase** the number of SCH require detailed written documentation describing the compelling academic reason for the increase in the number of required hours.

\*[**Program Name**](#_III._Directional_Prompts:)**:** Click or tap here to enter text.

**Program CIP Code**: Click or tap here to enter text.

**Request for Change in Semester Credit Hours (SCH):**

1. **Current SCH**:Click or tap here to enter text.
2. **Proposed SCH**:Click or tap here to enter text.
3. **Identify Course(s) for Deletion (Decrease)**: Click or tap here to enter text.
4. **Identify Course(s) for Addition (Increase)**: Click or tap here to enter text.
5. **Implementation Date (Term/Year)**:Choose an item.Choose an item.

***Complete Option 1 or 2 as appropriate:***

**Option 1: Reduction in Semester Credit Hours**

*Is the change in the number of SCH compatible with the requirements of accreditation for the program?*

1. Southern Association of Colleges and Schools Commission on Colleges: [ ]  YES [ ]  NO
2. Program Accreditor(s): [ ]  YES [ ]  NO [ ]  NA

 Name of Program Accreditor: Click or tap here to enter text.

1. Licensing Body(ies): [ ]  YES [ ]  NO [ ]  NA

 Name of Licensing Body(ies): Click or tap here to enter text.

**\***[**Justification for proposed**](#_1._Proposed_Program) **semester credit hour decrease**:Click or tap here to enter text.

**Option 2: Increase in Semester Credit Hours**

*Provide detailed documentation, such as changes in accrediting agency or licensing body requirements, workforce needs, or academic professional standards and needs, describing a compelling reason for the change in the number of SCH:*

Click or tap here to enter text.

[ ]  **Degree Program Deletion/Closure**

*Complete this portion of the form to request the deletion of an existing double major degree program already on SHSU’s program inventory.*

**Last date students were/will be admitted to the program**: Click or tap here to enter text.

**Anticipated term of last student graduation**: Click or tap here to enter text.

**Degree program closure date**: Click or tap here to enter text.

**\***[**Justification for**](#_1._Proposed_Program) **deletion:** Click or tap here to enter text.

[ ]  **Create Double Major (Existing Degree Programs)***Complete this portion of the form to request the creation of a new double major from existing degree programs (Major 1 and Major 2) already on SHSU’s program inventory.*

|  |
| --- |
| **Administrative Program Information (Existing)** |
| Include administrative information for **both the Baccalaureate** programs |
|  | **Baccalaureate Program Information (Major I)** | **Baccalaureate Program Information (Major II)** |
| **1. Existing Program Name:**  |  |  |
| **2. \***[**CIP Code (Number/Title):**](http://www.txhighereddata.org/Interactive/CIP/) |  |  |
| **3. \*****[Number of Required Semester Credit Hours (SCH):](#_3.__Number" \o "The minimum semester credit hours for completion.)** |  |  |
| **4. \***[**Administrative Unit**:](#_4.__Administrative) |  |  |
| **5. \*****[Location and Delivery Mode:](#_5.__Location" \o "Provide the location of instruction and how the program is delivered to students. (e.g., Instructed on the main campus, face-to-face).Online delivery mode requires the identification of the following categories: 1) Face-to-Face; 2) Hybrid, 3) 100% online.)** | Choose an item. | Choose an item. |
| **6. \***[**Contact Person:**](#_7.__Contact) [ ]  Contact person is the same for both programs | Name:Title:E-mail:Phone: | Name:Title:E-mail:Phone: |
| **Proposed Double Major Program Information** |
| **1. \*Proposed** **[Program Name:](#_1.__Program" \o "Show how the program would appear on Institutions's degree program inventory (e.g., Bachelor of Science, Double Major in Education and English). )** |
| **2. \*****[Number of Required Semester Credit Hours (SCH):](#_3.__Number" \o "The minimum semester credit hours for the proposed  Double Major program (THECB minimum 120 SCH).)**  |
| **3. \***[**Administrative Unit for Proposed Program:**](#_4.__Administrative) |
| **4. \***[**Location and Delivery Mode**](#_5.__Location)**:** Choose an item. |
| **5. \***[**ProposedImplementation Date:**](#_6.__Proposed)Choose an item.Choose an item. |
| **6. \***[**Contact Person(s):**](#_7.__Contact)  **Name:** **Title:** **E-mail:**  **Phone:** **Name:** **Title:** **E-mail:**  **Phone:** |
| **7. \***[**Administrative Notes**](#_7.__Contact)**:** |

1. **Program Description**
	1. **\*****[Purpose:](#purpose" \o " Provide an overview/description of the program, including the program learning objectives and overaching goals)**
		1. [**Program Learning Objectives**](file:///%5C%5Cwinfscommon%5Ccommon%5CAcad%20Plan%20Assmt%5CAPPD%20ProgDev_Curr%20Forms%5CBlooms%20Verbs.pdf)**:** Upon completion of the program, students will be able to:
			1. Learning Objective
			2. Learning Objective
			3. Learning Objective
			4. Learning Objective
			5. Learning Objective
	2. **\*****[General Admission Criteria:](#admission" \o "Describe the general admission requirements for admission into Double Major program. This could include (but not limited to) GPA and prerequisite courses.)**
2. **Justification:**
3. **\*****[Justification for proposed Double Major program](#_1._Proposed_Program" \o "Justification of need for the Double Major program, may include but not required workforce and/or student demand data.)**:Click or tap here to enter text.
4. **Curriculum:**
	1. **\*****[Description of course sequencing:](#course" \o "Provide a qualitative description of the course sequencing for the proposed Double Major program. Please, be as detailed as possible in this section. In addition, complete the curriculum information tables below.)**

**Curriculum Information: Course List**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Prefix and Number** | **Course Title** | **SCH** |
| **Degree Specific Requirement** |   |   |   |
| **Major I: Foundation**  |  |  |  |
| **Major I: Prescribed Electives** |  |  |  |
| **Major II: Foundation**  |  |  |  |
| **Major II: Prescribed Electives** |   |   |   |
| **Electives: General** |   |   |   |
| **Electives: Advanced** |   |   |   |
| **Minor** |   |   |   |
|  |  |  |  |
| **TOTAL** |   |   |   |

**Curriculum Information: Plan of Study**

|  |
| --- |
| **Year 1** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Year 2** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Year 3** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Year 4** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Year 5** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Year 6 (If applicable)** |
| **Fall**  | **Hours** | **Spring**  | **Hours** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  **Total SCH** | **150** |

1. **Required Appendices:**
2. **Copy of current Plan** [Undergraduate Degree: Major I](https://catalog.shsu.edu/undergraduate/)
3. **Copy of current Plan** [Undergraduate Degree: Major II](https://catalog.shsu.edu/undergraduate/)
4. **Marketable Skills:** *Identify 3-5 marketable skills that students will attain through the proposed program***.**
* Marketable Skill.
* Marketable Skill.
* Marketable Skill.
* Marketable Skill.
* Marketable Skill.

**END FORM**

 **Approval Recommendation Signatures:**

|  |
| --- |
| **Approval Recommendation Signatures** |
| **Approved by Department Head/Faculty** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
|  |  |  |  |  |
| **Approved by Department Chair 1 (Major 1)** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
| **Approved by Department Chair 2 (Major 2))** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
| **Approved by Department CC (If applicable)** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
|  |  |  |  |  |
| **Approved by College CC (If applicable)** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
|  |  |  |  |  |
| **Approved by Academic Dean 1 (Major 1)** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
| **Approved by Academic Dean 2 (Major 2)** | Approved |
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
|  |  |  |  |  |
| **Approved by Director of APPD** | Approved |[ ]  Disapproved |[ ]
| Signature: Click or tap here to enter signature. | Date: Click or tap here to enter date. |
|  |  |  |  |  |

**CC = Curriculum Committee
APPD = Academic Planning and Program Development**

**APPD Use Only
Added to Catalog** [ ]

Date: Click or tap here to enter date.

**Added to Banner, if applicable** [ ]

Date: Click or tap here to enter date.

**Added to Degree Works** [ ]

Date: Click or tap here to enter date.

**Notified Advising** [ ]

Date: Click or tap here to enter text.

 **Added to Apply Texas, if applicable** [ ]

Date: Click or tap here to enter date.

**Directional Prompts:**

**CHANGE SEMESTER CREDIT HOURS**

**Program Name:**

Show how the program would appear on the Institution’s program inventory (e.g., Bachelor of Science, Double Major in Education and English).

**Justification:**

Brief justification of need for the requested semester credit hour decrease.

**DEGREE PROGRAM DELETION/CLOSURE**

**Justification:**

Brief justification for requested deletion.

**CREATE DOUBLE MAJOR (EXISTING DEGREE PROGRAMS)**

 **Proposed CIP:**
Enter the CIP Code/Title.

**Number of Required Semester Credit Hours (SCH):**
The minimum semester credit hours for completion.

**Administrative Unit**:
Identify where the program would fit within the organizational structure of the university (e.g., The Department of English within the College of Humanities and Social Sciences).

**Location and Mode of Delivery:**
Provide the location of instruction and how the proposed program will be delivered to students. (e.g., Instructed on the main campus, face-to-face). Online delivery mode requires identification of the following categories: 1) Face-to-Face; 2) Hybrid; 3) 100% Online.

**Contact Person:**
Provide contact information for the person responsible for addressing any questions about the proposal.

**PROPOSED DOUBLE MAJOR PROGRAM INFORMATION**

**Proposed Program Name:**

Show how the program would appear on the Coordinating Board’s program inventory (e.g., Bachelor of Science, Double Major in Education and English).

**Number of Required Semester Credit Hours (SCH):**
The minimum semester credit hours for the proposed Double Major program (THECB minimum 120 SCH).

**Administrative Unit**:
Identify where the program would fit within the organizational structure of the university (e.g., The Department of English within the College of Humanities and Social Sciences).

**Location and Mode of Delivery:**
Provide the location of instruction and how the proposed program will be delivered to students. (e.g., Instructed on the main campus, face-to-face). Online delivery mode requires identification of the following categories: 1) Face-to-Face; 2) Hybrid; 3) 100% Online.

**Proposed Implementation Date:**
Provide the term and year that students would enter the program.

**Contact Person(s):**
Provide contact information for the person(s) responsible for addressing any questions about the proposal:

**Administrative Notes:**
Add administrative notes, if applicable.

**Purpose:**

Provide an overview/description of the program, including the program learning objectives and overarching goals.

**Admission:**Describe the general admission requirements for admission into Double Major program. This could include (but not limited to) GPA and prerequisite courses.

**Justification:**

Justification of need for the Double Major program, may include but not required workforce and/or student demand data.

**Description of Course Sequencing:**
Provide a qualitative description of the course sequencing for the proposed Double Major program. Please, be as detailed as possible in this section. In addition, complete the curriculum information tables below.