**Louisiana Board of Regents**

**2011 Academic Program/Low Completer Review**

**APPEAL for CONSOLIDATION of Existing Academic Program**

Please submit an electronic copy (email attachment preferred; signed PDF may also be attached) of the completed document to Dr. Karen Denby, Associate Commissioner for Academic Affairs, at [karen.denby@la.gov](mailto:karen.denby@la.gov) no later than **Monday, February 28, 2011**. Early submission is welcome. All requests for consolidations must be submitted through the appropriate system office. Documentation of campus and system final approvals of the new curriculum must be provided before the inventory addition will be presented to the Board of Regents. Upon approval of the consolidation appeal, Regents’ staff will provide instructions for final consolidated curriculum approval.

**General Information DATE:**

|  |  |
| --- | --- |
| Campus: | College/School with Program(s): |
| ‘Old’ Program(s) to be Changed (Title, CIP):  -  - | ‘New’ Program Title & CIP, concentrations/minors:  -  -  - |
| Program Coordinator/Contact Info: | |

**Description and Rationale**

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| A. Brief description of what the consolidation would entail and a plan for implementation |
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| B. Reasons why a consolidated program should succeed compared to the current arrangement |
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| --- | --- |
| C. **Total credit hours in curriculum for proposed consolidated program: \_\_\_\_\_\_\_\_\_\_\_\_\_**  Outline the curriculum (*Course Rubric, Title, Credits* ) for the proposed consolidated program. Indicate any new courses that will be offered in the new program.  ***\*\*For Teacher Education changes/consolidations, use Official Plan Form instead of this block.\*\****  [*http://regents.louisiana.gov/index.cfm?md=pagebuilder&tmp=home&pid=95*](http://regents.louisiana.gov/index.cfm?md=pagebuilder&tmp=home&pid=95) | |
| CORE  -  - | Concentration/Minor:  -  - |
| Concentration/Minor:  -  - |

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| D. Indicate any special requirements. If the consolidation involves a graduate degree, indicate if a thesis or dissertation is required or, if not, what is substituted. |
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**Students**

1. Provide enrollment and completer data for the last three years for each existing program involved in the consolidation, *by year classification*. Please use the tables below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Existing Degree Program:** | **ENROLLMENT Data:** | | |
| 2007-2008 | 2008-2009 | 2009-2010 |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Existing Degree Program:** | **COMPLETER Data:** | | |
| 2007-2008 | 2008-2009 | 2009-2010 |
|  |  |  |  |
|  |  |  |  |

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| B. Explain how students currently enrolled in programs involved in the consolidation will be advised/transferred into the new program and how they may benefit from the consolidation of existing programs. |
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**Fiscal Impact**

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| --- | --- |
| Provide a five-year projection of the anticipated fiscal impact or opportunities for reinvestment, with consolidation. (Explain projections, as applicable.) | |
| Year 1 |  |
| Year 2 |  |
| Year 3 |  |
| Year 4 |  |
| Year 5 |  |

**Other Information**

Present any other significantly pertinent information that has not been requested.

Program Terminations as a result of this Review and Appeal will be on the inventory, effective **May/2011**.

Expected Date (Mo/Yr) for Full Approval and Implementation of the new program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

***Note****. It is expected that if a consolidation appeal is accepted by the Board of Regents any resulting new program will be fully approved (by campus, system, BoR) no later than December 2011. Should this not occur, the institution will have to submit a full proposal for the new academic program following Academic Affairs Policy 2.05.*

*Approvals (for BoR purposes only):*

|  |  |  |  |
| --- | --- | --- | --- |
| *Board of Regents: Appeal* | *Campus – Program* | *System Office – Program* | *Board of Regents - Final* |
|  |  |  |  |