I. General Information

Name of college: _______________________________________________________________________

Program: ____________________________________________________________________________ CIP code: ______

Program marketing name: ________________________________________________________________

Program length: ______ semester credit hours

Proposed start semester and year ______________________

II. Program Need

A. Demonstrate need for program.

1. Attach minutes of program advisory committee meeting indicating committee member support for new short-term certificate award.

2. Attach letter of support from program advisory committee chair.

3. Attach local occupational demand data indicating need for short-term certificate graduates in program.

4. Attach synopsis of local industry survey results.

5. Attach copies of returned industry survey instruments. (See Attachment A.)

6. State below other appropriate information indicating need for short-term certificate award in program.

B. List below specific occupations for which this short-term certificate award would prepare students to enter and/or advance.
III. Enrollment

A. List below anticipated activities for recruiting students into proposed short-term certificate program.

B. Estimate the part-time and full-time student enrollment in the short-term certificate program for the first three years of program operation.

<table>
<thead>
<tr>
<th>ENROLLMENT PROJECTIONS</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>AVERAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Full-time Enrollment</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Projected Part-time Enrollment</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
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</tbody>
</table>

IV. Fiscal and Personnel Requirements

A. Estimate the amount of new funds required to support the proposed short-term certificate program.

<table>
<thead>
<tr>
<th>ESTIMATED NEW FUNDS REQUIRED TO SUPPORT PROPOSED C26 PROGRAM</th>
<th>EXPENDITURE</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Library &amp; Other Learning Resources</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Facilities</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Equipment</td>
<td></td>
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</tr>
<tr>
<td>Staff</td>
<td></td>
<td></td>
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<tr>
<td>Other</td>
<td></td>
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<td></td>
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<tr>
<td>TOTAL</td>
<td></td>
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</tr>
</tbody>
</table>
B. Indicate sources of required new funds.

<table>
<thead>
<tr>
<th>SOURCE</th>
<th>YEAR 1</th>
<th>YEAR 2</th>
<th>YEAR 3</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Appropriations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuition</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Internal Reallocations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>External Funds</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
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</tbody>
</table>

C. List below the number of new full-time and part-time faculty and staff positions required to support the proposed short-term certificate program.

   Faculty: _____ Full-time     _____ Part-time
   Staff:     _____ Full-time     _____ Part-time

V. Coordination With Other Agencies and Institutions

   A. Does the proposed program duplicate any program(s) offered in your area by a secondary or postsecondary school? _____ Yes _____ No
      If yes, list below the program(s) and school(s) offering program(s).

   B. Will VA approval be sought for this program? _____ Yes _____ No

VI. Program of Study

   A. List below the courses that would comprise the proposed short-term certificate award.

<table>
<thead>
<tr>
<th>Course Prefix &amp; Number</th>
<th>Course Title</th>
<th>Credit Hours</th>
</tr>
</thead>
</table>

II. Contact Information, President Signature

Identify the individual at the college to contact for additional information.

   Name ________________________________________________________________
   Title ________________________________________________________________
   Telephone ____________________________________________________________
   E-mail ______________________________________________________________

   Signature __________________________________________________________
   (President)
Attachment A

INDUSTRY SURVEY FOR NEW INSTRUCTIONAL PROGRAM

Colleges submit this survey instrument and a cover letter to employers in the occupational area of the proposed new program. Colleges may include additional questions. The purpose of this survey is to obtain local employer information that indicates the degree of need for the proposed new program.

College completes this information:

College submitting this survey instrument: ______________________________________

New instructional program being proposed: ________________________________________________

Survey respondent completes the following:

Name of business responding to survey: _________________________________________________

Address: ________________________________________________________________________

________________________________________________________________________________

Contact Person:  __________________________________________________________________

(Name)  

(Title)

Telephone Number: (____)_______ - __________________

1. Total number of employees company employs in field directly related to proposed new instructional program: _______

2. Approximately how many replacement and/or additional “full-time” employees will the company employ in this field in each of the next three years?     __________

   Year 1

   Year 2

   Year 3

3. Would the company employ individuals with training provided in the proposed instructional program if positions were open in the company?  _____ Yes  _____ No

4. Would the business consider sending employees to take courses in the proposed instructional program?  _____ Yes  _____ No  If yes, estimate the number of employees: __________

5. Do you believe there is a need for this new instructional program in the area?  _____ Yes  _____ No

6. Estimate industry hourly wages for employees in this field.
   $_______ per hour (entry level)
   $_______ per hour (maximum)
College completes this information:

Return survey instrument to:

Name:
College:
Address:

Return by (date):

For information, contact: