



**Alabama Community College System
Intent to Submit a Program Application (ISPA)**

A. General Information:

- 1. Name of College: _____
- 2. Program Title: _____ Prefix: _____
- 3. Date of Application Submission: _____
- 4. Proposed Program Implementation Date: _____
- 5. AAS _____ CER _____ STC _____ CIP Code _____
- 6. Marketing Name: _____
- 7. Options (List proposed options under appropriate award):

Short-Term Certificate		Certificate		Associate in Applied Science/Technology	
CIP Code	Option	CIP Code	Option	CIP Code	Option

- 8. Location: Campus _____ Instructional Site _____
 Off-Campus Site _____ Clinical/Industrial Site _____
 Agencies _____

B. Institutional Contacts:

_____ Telephone _____ E-mail _____
 Program Director or Department Head

_____ Telephone _____ E-mail _____
 Instructional Dean

_____ Telephone _____ E-mail _____
 Financial Aid Director

_____ Telephone _____ E-mail _____
 President

C. Description of program content and objectives:

1. Program Description. (You may use program descriptions from the NCES Classification of CIP Codes <http://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55>)
2. List objectives of the program. The objectives should address specific needs the program will meet (institutional, societal, and employability) contiguous with expected learning outcomes and achievements. **Objectives must lend themselves to subsequent review and assessment of program accomplishments.**
3. Method of program delivery (traditional classroom, online, hybrid):

D. Employer need, student demand, and program justification:

1. BRIEF preliminary documented demand to justify and sustain the program.
2. BRIEF preliminary indicators of employer need in high-wage high demand CTE occupations or training and re-training in multi-functional skills fields of employment.
3. Identify similar programs with other colleges/universities that could justify collaboration.

E. Resources to support the program:

1. BRIEF estimate of the availability of sufficient funds to implement and sustain the program. Indicate if outside funding is available (grants, Perkins, WIOA, etc.).

F. Institutional context:

1. Address programmatic relationships.
 - a. Does this program relate to other programs within the institution?
 - b. Will it replace an existing program?

G. Program Accreditation/Certification and Nationally Recognized Business and Industry Credentials:

1. Identify and describe the accreditation, credential(s) and/or certification(s) to be offered by this program. *Example: The Commission on Accreditation in Physical Therapy Education (CAPTE) is an accrediting agency that is nationally recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). CAPTE grants specialized accreditation status to qualified entry-level education programs for physical therapists and physical therapist assistants.*
2. Stipulate the benefit(s) to the student with specific support from local business and industry regarding increased preference as a job applicant.
3. Are the credential(s) and/or certificate(s) to be offered listed on the ACCS approved credential list? If not, please contact the ACCS Workforce Development CTE Department to have it considered for addition.

4. Please describe the steps your institution will take to receive accreditation and/or offer credential(s) and/or certification(s). Include a timeline that aligns chronological milestones for each step with a final date for implementation.
5. Describe costs directly associated in achieving accreditation and/or offer credential(s) and/or certification(s).

Please note: Nationally recognized business and industry credentials for students may be a requirement for financial aid.