

***Alabama Community College System***

***Proposal for a New Degree Program***

**College:**

**□ Associate of Applied Science**

**□ Associate of Applied Technology**

**□ Certificate**

1. Date of Proposal Submission:

2. Full Program Name:

3. Marketing Name:

4. CIP Code:

5. Learning Outcomes and Program Review:

Succinctly list four (4) but not more than seven (7) of the most prominent student learning outcomes of the program.

b.

c.

d.

e.

f.

g.

6. Employment Outcomes and Program Demand

1. Indicate the primary industry where graduates would seek employment using the North American Industry Classification System (NAICS): [www.naics.com/search/](http://www.naics.com/search/).

NAICS Code:

1. Select at least one (1) and up to three (3) Standard Occupational Codes (SOCs) where graduates of the new program would seek employment: [www.bls.gov/soc/2018/major\_groups.htm](http://www.bls.gov/soc/2018/major_groups.htm)

SOC Code 1: (Required)

SOC Code 2:

SOC Code 3:

1. Please explain whether further education/training is required for graduates of the proposed program to gain entry-level employment in the occupations selected.
2. Please describe how you will determine whether graduates are successful in obtaining relevant employment or pursuing further study.
3. Briefly describe how the program fulfills a specific industry or employment need for the State of Alabama. Please refer to the State’s “In-Demand Occupations List” (see ACHE’s Academic Program page for most recent list) or include local and statewide occupational projections, along with data sources as appropriate.
4. Briefly describe evidence of student demand for the program, including enrollments in related coursework at your institution if applicable.
5. If a survey of student interest was conducted, briefly describe the survey instrument, number and percentage of respondents, and summary of results.

7. Curriculum and Prerequisites

1. Program Completion Requirements (Enter a credit hour value for all applicable components, write NA if not applicable)

Credit hours required in program courses

Credit hours in general education or core curriculum

Credit hours required in support courses

Credit hours in required or free electives

Credit hours in required research

Total Credit Hours Required for Completion

1. Please indicate the maximum number of credits that can be transferred in from another institution and applied to the program:
2. Please describe any work-based learning (WBL) activities that are required or recommended for program completion (including internships, practical/clinical experience, applied research, or other immersive experiences designed to prepare graduates for employment in the field). Definitions and examples of different types of WBL are available at [www.alapprentice.org](http://www.alapprentice.org).
3. Does the program include any options/concentrations? If so, please describe the purpose and rationale for the options, and list the courses for each in the table below.
4. Please complete the table below indicating all coursework for the proposed program, specifying any new courses developed for the program, along with the courses associated with each option as applicable. Include the course number, course title, and number of credits. Coursework listed should total the number of hours required to complete the program.

|  |  |  |
| --- | --- | --- |
| **Course Number and Title** | **Number of Credit Hours** | **\*If New Course** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. Intended program duration in semesters for full-time students:
2. Intended program duration in semesters for part-time students:
3. Please indicate any prior education or work experience required for acceptance into the program.
4. Describe any other special requirements for the program.

7. Specific Rationale (Strengths) for Program

1. What is the specific rationale for recommending approval of this proposal? List 3-5 potential program strengths:

1.

2.

3.

4.

5.

1. Please list any external entities that have supplied letters of support attesting to the program’s strengths. Attach support letters with the proposal.

8. Program Resource Requirements

1. Faculty
2. Please provide or attach a brief summary of primary and support faculty that includes their qualifications specific to the program proposal. Note: institutions must maintain and have current and additional primary and support faculty curriculum vitae available upon ACHE request for as long as the program is active, but you do not need to submit a CVs with this proposal.
3. Please provide faculty counts for the proposed programs:

|  |  |  |
| --- | --- | --- |
| **Status** | **Faculty Type** | |
| **Primary** | **Support** |
| Current Full-Time |  |  |
| Current Part-Time |  |  |
| Additional Full-Time to be hired |  |  |
| Additional Part-Time to be hired |  |  |

Note: Annual compensation costs for additional faculty to be hired should be included in the NEW ACADEMIC DEGREE PROGRAM SUMMARY table.

1. Briefly describe the qualifications of new faculty to be hired:

1. Staff

Will the program require dedicated staff? Yes No

If yes, indicate the number or percentage of FTEs. Salary/benefits costs should be included in the program summary table below.

Note: Annual compensation costs for staff to be hired should be included in the NEW ACADEMIC DEGREE PROGRAM SUMMARY table.

1. Equipment

Will any special equipment be needed specifically for this program?

Yes No

If yes, please list the equipment. These costs should be included in the NEW ACADEMIC DEGREE SUMMARY TABLE.

1. Facilities

Will any new facilities be required specifically for the program?

Yes No

If yes, please list. Only new facilities need to be listed. These costs should be included in the NEW ACADEMIC DEGREE SUMMARY TABLE.

1. Library

Will additional library resources be required to support the program?

Please provide a brief description of the current status of the library collections supporting the proposed program.

If yes, please briefly describe how any deficiencies will be remedied, and include the cost in the NEW ACADEMIC DEGREE SUMMARY TABLE.

1. Assistantships/Fellowships

Will the college offer any assistantships specifically for this program?

Yes No

If yes, how many assistantships will be offered?

The costs should be included in the NEW ACADEMIC DEGREE SUMMARY TABLE.

**New Academic Degree Program Summary: Instructions**

* The NEW ACADEMIC DEGREE PROGRAM SUMMARY table is intended to provide a realistic estimate of the costs of the program over the first seven years of implementation and also serves as the basis for post-implementation conditions for new enrollments and completions.
* This should only include only \***the additional costs*\**** that will be incurred after implementation, not to include any current costs. For instance, if new faculty will be hired for the program, new faculty salary/ benefits should be included for each year following implementation, but salary/benefits for existing faculty would not be included.
* Indicate the **\*new\*** sources and amounts of funds available for the program’s support, not to include any current revenues. For instance, if the proposed program will replace an existing program or option, you would only count tuition for additional students over and above the current revenue levels.
* Completion projections **must meet minimum viability requirements** set by §16-5-8(2) of the *Code of Alabama, 1975*:

Associate degree 7.5 graduates per year on average

* New enrollment projections must be sufficient to ensure that the program will be sustainable over time and meet minimum viability requirements for program graduates. Therefore, new enrollment numbers must exceed completion numbers to account for attrition or enrollment fluctuations.
* Please use the attached Excel form for the budget and completions summary.