***Oklahoma State University***

**INTERNAL ROUTING/SIGNATURE APPROVAL SHEET for
NEW and MODIFIED DEGREE PROGRAMS**

**This routing sheet is to be used for all new program proposals or for modifications to existing programs (certificate and degree programs). Signatures of individuals below indicate their review and approval of the attached Program Request. Please attach this routing sheet to the Regents Program Request Form, along with the complete proposal.**

**Title of Existing Program** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of Proposed Program

Type of Program *(circle)*: **BACCALAUREATE MASTERS DOCTORATE**

**CERTIFICATE: (Undergraduate or Graduate) SPECIALIST**

Name of Academic Unit (e.g., Department, Division, School)

Name of Dept./School Head or Program Director

Name and Title of Contact Person

Campus Address and Phone of Contact Person

Printed Name: Department/School Curriculum Chair Signature/Date

Printed Name: Academic Unit Graduate Coordinator**\*** Signature/Date

Printed Name: Dept./School Head or Program Director Signature/Date

Printed Name: College Curriculum Chair Signature/Date

Printed Name: College Dean Signature/Date

Printed Name: Graduate Council Vice-Chair**\*** Signature/Date

Printed Name: Graduate Dean**\*** Signature/Date

Printed Name: Instruction Council Chair Signature/Date

**\*Required only for graduate programs.**

***Oklahoma State Regents for Higher Education***

**Program Request Form for New Traditional Program, New Online Program OR EXISTING Program Offered Traditionally at a New Location**

Click here to select your institution

Institution Submitting Proposal

Select Level I Designation for proposed program

Formal Degree (Level I)

Click here to enter Level II Degree Designation for proposed program

Degree Designation as on Diploma (Level II)

in

Click here to enter Level III title for the proposed program

Title of Proposed Degree Program (Level III)

With options (Level IV) in: Click here to enter option

 Click here to enter option

 Click here to enter option

 Click here to enter option

Select delivery method

Method of Delivery (i.e., traditional only/electronic only/both)

Delivery location (s) (e.g. Warner, Tulsa, Ardmore): Click here to enter delivery location

CIP Code (6 digits) Click here to enter text

Suggested Instructional Program Code Click here to enter text

(if left blank the next available program code will be assigned)

Academic Unit (e.g. Department, Division, School) Click here to enter text

Name of Academic Unit Click here to enter text

Name of Program Director Click here to enter text

Intended Date of Implementation Click here to enter text

Anticipated Date for Granting First Degrees or Certificates Click here to enter text

Specialty Accrediting Agency (if applicable) Click here to enter text

Name, Title and Information of Contact Person Click here to enter text

Date of Letter of Intent Click here to enter a date

(The letter of intent must have been submitted to the Chancellor prior to submitting the proposal)

Date of Governing Board Approval Click here to enter a date.

**Signature of President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:** Click here to enter a date

**Evaluation Criteria**

All actions in the approval of new programs for public institutions are subject to a stipulation regarding the program’s ability to attain specified goals that have been established by the institution and approved by the State Regents. At the conclusion of an appropriate period of time, the program’s performance shall be reviewed on the basis of the specified goals in a manner mutually satisfactory to the sponsoring institution and the State Regents. Final endorsement of the program will depend on demonstrated viability.

**New or Existing Programs Proposed for Other Than the Main Campus**

Courses intended to meet degree requirements for a new or existing program to be offered at sites other than the institution’s main campus, including the Ardmore, Ponca City, and Tulsa areas, are subject to approval by the State Regents. Policies involved in the consideration of new site requests include the following: *3.2 Function of Public Institutions, 3.4 Academic Program Approval Policy, and 3.17 Electronically Delivered and Traditional Off-Campus Courses and Programs*.

Oversight of unnecessary program duplication is a high priority of the State Regents. Where other similar programs may serve the same potential student population, avenues of institutional collaboration must have been explored, the proposed program must be sufficiently different from existing programs, and access to existing programs must be sufficiently limited to warrant initiation of a new or existing program offering at the additional site.

Review of academic programs delivered in the immediate Tulsa area by Oklahoma public universities and colleges will ensure no unjustifiable program duplication and ensure that the needs of all Tulsa area students are met. This review is consistent with OSRHE Policy 3.4 *Academic Program Approval* and involves consideration of student demand for the program, employer demand for the program, demand for services or intellectual property of the program, and alternative forms of delivery and consortial or joint programs. Where other similar programs may serve the same potential student population, evidence must demonstrate that the proposed program (whether or not it is a new academic program or an extension of an existing program) is sufficiently different from the existing program(s) offered by other institutions or that access to the existing program(s) is sufficiently limited to warrant initiation of a new program offering.

State Regents’ *Academic Program Approval* policy specifies that “Normally, proposed programs in undergraduate core areas consisting of basic liberal arts and sciences disciplines would not be considered unnecessary duplicative. Unnecessary duplication is a more specific concern in vocational/technical, occupational, and graduate and professional programs which meet special manpower needs” (3.4.6 H).

1. **Centrality of the Proposed Program to the Institution’s Mission and Approved Function(s)**

A program should adhere to the role and scope of the institution as set forth in its mission statement and as complemented by the institution’s academic plan. There are certain circumstances when institutions may request approval to offer programs outside their function as stated in the *Functions of Public Institutions* policy.However, budget constraints, system efficiency, and concerns about institutional capacity and priorities may further limit expansion of programmatic functions. Requests of this nature should be on a limited basis. *Institutions requesting programs outside their approved programmatic function should contact Dr. Stephanie Beauchamp (sbeauchamp@osrhe.edu) or Ms. Heather Peck (hpeck@osrhe.edu) for additional information and supplemental forms.*

In the space below, list the objectives of the proposed program and explain how the proposed program relates to the institutional approved function(s), mission, and academic plan.

Click here to enter text

1. **Curriculum**

The curriculum should be structured to meet the stated objectives of the program. Explain how the curriculum achieves the objectives of the program by describing the relationship between the overall curriculum or the major curricular components and the program objectives. Additionally, indicate the total number of new courses and how development of new courses will be funded. (*Do not list specific curricular information/courses here*.)

Click here to enter text

**For undergraduate degree programs only**

As part of the broader work of the Mathematics Success Initiative, the Math Pathways Task Force has identified four gateway mathematics courses that are suitable general education mathematics course options. These courses, *College Algebra/Pre-Calculus, Introduction to Statistics, Functions and Modeling, and Quantitative Reasoning*, are included on the Course Equivalency Project transfer matrix and provide rigorous mathematical content that is more relevant and appropriate for specific academic majors.

If the proposed program requires a general education mathematics course, please complete the following questions:

1. Which mathematics course is required as part of the general education requirements? If the program allows for multiple gateway mathematics course options, provide a rationale for each.

Click here to enter text

1. Describe how the mathematics course was selected and how it best meets the needs of the program’s students.

Click here to enter text

1. How does this mathematics course articulate with your partner institutions?

Click here to enter text

*(For more information regarding the gateway mathematics courses, contact Dr. Rachel Bates (405) 225-9168)*

The proposed program must meet the State Regents’ minimum curricular standards including the total credit hour requirements for program completion, liberal arts and sciences, general education, and area of specialization credit hour requirements (refer to State Regents’ policy 3.15 Undergraduate Degree Requirements). Additionally, the curriculum should be compatible with accreditation or certification standards, where available. Any clinical, practicum, field work, thesis, or dissertation requirements should be included in the proposal.

Provide the following information for the program and for each option (some categories may not apply to all programs):

**For Master’s and Doctorate Degrees:**

 Total number of hours required for degree: 

 Number of hours in program core: 

 Number of hours in option (if applicable): 

 Number of hours in thesis/dissertation/project: 

 Number of hours in electives (if applicable): 

**For Bachelor’s and AA/AS Degrees:**

 Total number of hours required for degree: 

 Number of hours in general education: 

 Number of hours in major: 

 Number of hours in degree program core (if applicable): 

 Number of hours in option (if applicable): 

 Number of hours in guided electives (if applicable): 

 Number of hours in general electives (if applicable): 

**For AAS Degrees:**

 Total number of hours required for degree: 

 Number of hours in general education: 

 Number of hours in technical specialty: 

 Number of hours in technical support courses: 

 Number of hours in technical related coursework (if applicable): 

**For Certificates:**

 Total number of hours required for certificate: 

 Number of hours in general education: 

 Number of hours in core: 

 Number of hours in guided electives (if applicable): 

 Number of hours in general electives (if applicable): 

Describe how the proposed program will articulate with related programs in the state. The extent to which student transfer has been explored and coordinated with other institutions should be explained.

Click here to enter text

**Specific curricular information.** Using the template in Appendix A, list courses (prefix, course number, and course title) under the appropriate curricular headings (i.e. General Education, Program Requirements, Program Core, Option Requirements, General Electives).

Number of new courses required: 

1. **Academic Standards**

Clearly state the admission, retention, and graduation standards, which must be equal to or higher than the State Regents’ policy requirements, and should be designed to encourage high quality.

Click here to enter text

1. **Faculty**

Faculty resources shall be adequate and appropriate for the proposed program. The number of faculty will meet external standards where appropriate. The qualifications of faculty will support the objectives and curriculum of the proposed program. Faculty qualifications, such as educational background, non-collegiate and collegiate experience, and research and service interests and contributions, which relate to the proposed program, should be summarized. The institution must demonstrate that core programmatic faculty possess the academic and research credentials appropriate to support the program. List all qualified faculty that will support the proposed program. Attach faculty vita or provide explicit summaries*.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Faculty Name** | **Credential****(i.e. MFA, PhD)** | **Discipline** | **Institution that granted degree** |
| Click here to enter text | Click here to enter text | Click here to enter text | Click here to enter text |
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*Add more rows if needed*

1. **Support Resources**

Access to the qualitative and quantitative library resources must be appropriate for the proposed program and should meet recognized standards for study at a particular level or in a particular field where such standards are available. Books, periodicals, microfilms, microfiche, monographs, and other collections shall be sufficient in number, quality, and currency to serve the program. Adequacy of electronic access, library facilities, and human resources to service the proposed program in terms of students and faculty will be considered.

Physical facilities and instructional equipment must be adequate to support a high-quality program. The proposal must address the availability of classroom, laboratory, and office space as well as any equipment needs. Describe all resources available.

Click here to enter text

1. **Demand for the Program**

Proposed programs must respond to the needs of the larger economic and social environment. Thus, the institution must demonstrate demand for the proposed program in all delivery locations.

1. Student Demand: Clearly describe all evidence of student demand, normally in the form of surveys of potential students and/or enrollments in related programs and courses at the institution, which should be adequate to expect a reasonable level of productivity. If applicable, provide documentation of survey responses or other data collected indicating student interest in the proposed program.

Click here to enter text

1. Employer Demand: Clearly describe all evidence of sufficient employer demand, especially in the five workforce ecosystems developed by the State Department of Commerce that includes aerospace and defense, energy, agriculture and biosciences, information and financial services, and transportation and distribution. This demand can be demonstrated in the form of anticipated openings in an appropriate service area and in relation to existing production of graduates for the institution’s service area and/or state. Such evidence may include employer surveys, current labor market analyses, and future manpower projections. The following websites may also provide useful information: <https://oklahomaworks.gov/oklahoma-workforce-data/critical-occupations/> and <https://oklahoma.gov/oesc/labor-market/employment-projections.html>. Additionally, workforce demand with corresponding degree production data be obtained by contacting Ms. Cass Minx, Director of Workforce and Economic Development at (cminx@osrhe.edu). Where appropriate, provide evidence, normally in the form of letters of support or copies of advisory board minutes, that demonstrate employers’ preferences for graduates of the proposed program over persons having alternative existing credentials and employers’ willingness to pay higher salaries to graduates of the proposed program. The response should clearly identify positions that graduates will be prepared for after completing the proposed program.
	1. Provide a list of specific occupations that graduates will be prepared for after completing the proposed program and the projected employment growth (local, regional, statewide) over the next five years for the workforce associated with the program/listed occupations.

Click here to enter text

* 1. What requirements/credentials (if any) would be required beyond completion of the proposed program for graduates to enter the workforce/listed occupations?

Click here to enter text

* 1. Does the proposed program prepare students to sit for any examination needed for licensure and/or certification?

Yes [ ]

If yes, please specify the names of the exams and related licenses and/or certifications.

Click here to enter text

No [ ]

If no, describe any and all additional requirements needed for students to be eligible to sit for licensure and/or certification exams or indicate N/A.

Click here to enter text

**Estimated Student Enrollment Demand for the Program**

Project estimated student enrollment demand for the **first five years** of the program.

|  |  |  |
| --- | --- | --- |
| **Academic Year****(e.g. 2021-2022)** | **Degrees Conferred** | **Majors (Headcount) Fall Semester****(e.g. # in Fall 2021)** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Programs are provisionally approved and given enough time for a planning year plus the number of years necessary to produce one graduating class (i.e. a two-year program is allowed three years to meet its graduate and enrollment goals, a four-year program is allowed five years, etc.) unless the institution makes a specific timeframe request with a strong rationale.

***Using the above estimated student demand, please indicate the specific productivity criteria and timeframe for final review of the program***:

|  |
| --- |
| This program will enroll a minimum of students in fall  (year), and graduate a minimum of students in (academic year)*.****(NOTE: Productivity data must come from the same academic year. Example: enroll a minimum of 50 students in fall 2025 and graduate a minimum of 35 students in 2025-2026)*** |

**Electronic Delivery**

State Regents’ policy (3.17) requires approval for a program that either (1) is offered in such a manner that a student can take 100 percent of the courses **for the major** (excludes general education) through online delivery **OR** (2) the program is advertised as available through online delivery (regardless of percentage available online).

Is this program intended to be offered through online delivery or other computer-mediated format or will it be advertised as available through online delivery or another computer-mediated format?

Yes [ ]  No [ ]

If yes, describe the delivery method that will be used to deliver the program content (e.g., Blackboard, Desire2Learn, etc.) including the major features that will facilitate learning.

Click here to enter text

Does your institution have prior Electronic Delivery Program approval?

Yes [ ]  No [ ]

***Note: If requesting institution has not gone through the electronic delivery approval process, you must also complete the Institutional Request for Electronic Delivery Approval section beginning on page 9 of this form.***

IPEDS has expanded the required reporting information regarding distance education in regards to degree programs and now requires information on three aspects of degree programs based on CIP code and degree level groupings. For more information regarding IPEDS reporting, go to the following website: <https://nces.ed.gov/ipeds/use-the-data/distance-education-in-ipeds>.

*Note:* The following responses addressing distance education are **separate from**the program’s **electronic delivery approval.**

For the proposed program, ***including*** general education courses, please select the statement that describes the program’s distance education availability:

[ ]  ALL of the courses in the proposed program can be completed entirely online.

[ ]  SOME of the courses in the proposed program can be completed entirely online.

[ ]  NONE of the courses in the proposed program can be completed entirely online.

For the proposed program, ***including*** general education courses, please select the appropriate response to each of the following statements:

The program has a mandatory\* onsite\*\* component: Yes [ ]  No [ ]

The program has a non-mandatory\* onsite component: Yes [ ]  No [ ]

 \* For the purposes of these questions, a mandatory onsite component refers to a course requirement or activity

in which a student MUST be physically on campus, such as orientation, laboratory requirements, meeting with faculty and is a part of the student’s overall class performance and grade. A non-mandatory onsite component refers to an activity in which the student is not required to participate, such as tutoring, attending events, meeting with advisor and will not impact the student’s overall class performance and grade.

\*\* For the purposes of these questions, onsite refers to the physical campus and NOT off-campus locations for

 internships, practica, clinicals, etc.

1. **Unnecessary Duplication**

The elimination of unnecessary program duplication is a high priority of the State Regents. Where other similar programs may serve the same potential student population, the proposed program must be sufficiently different from existing programs or access to existing programs must be sufficiently limited to warrant initiation of a new program.

Provide specific evidence that the proposed program is not unnecessarily duplicative of similar offerings at other state system institutions. The current degree program inventory is available online at:

<https://www.okhighered.org/oeis/ProductivityReport/InvParams.aspx>

Click here to enter text

If similar programs exist at other State System institutions, have you explored opportunities to collaborate in dual, joint, or consortial programs?

Yes [ ]

If yes, explain and, if applicable, attach Memorandum of Understanding and all appropriate documents regarding the dual, joint, or consortial degree plan. If collaboration is not feasible for the proposed degree program, or expansion of the degree program, explain.

Click here to enter text

No [ ]

If no, explain why efforts to collaborate were not pursued.

Click here to enter text

1. **Cost and Funding of the Proposed Program**

The resource requirements and planned sources of funding of the proposed program must be detailed in order to assess the adequacy of the resources to support a quality program. This assessment is to ensure that the program will be efficient in its resource utilization and to assess the impact of this proposed program on the institution’s overall need for funds.

Provide evidence of adequate funding, which will include, but not be limited to:

1. Reallocation of Existing Resources: The institution must provide evidence of campus funds to be reallocated to the proposed program. The source and process of reallocation must be specifically detailed. An analysis of the impact of the reduction of funds on existing programs and/or organization units must be presented.

Click here to enter text

1. Tuition and Fees: The institution must provide evidence of a projected increase in total student enrollments to the campus as a result of the proposed program and not just a redistribution of currently enrolled students.

Click here to enter text

1. Discontinuance or Downsizing of an Existing Program or Organizational Unit: The institution must provide adequate documentation to demonstrate sufficient savings to the state to offset new costs and justify approval for the proposed program.

Click here to enter text

**Cost/Funding Explanation**

Complete the following table for the first five years of the proposed program and provide an explanation of how the institution will sustain funding needs for the life of the proposed program in the absence of additional funds from the State Regents. \*The total funding and expenses in the table should be the same, or explain sources(s) of additional funding for the proposed program. ***(NOTE: Please round each amount to the nearest whole dollar. Each funding and/or expense amount provided must include an explanation regarding the source of the funds or how the funds will be utilized.)***

**Cost/Funding Summary:**

**Program Resource Requirements**

|  | **Year of Program** |
| --- | --- |
| **A. Funding Sources** | **1st Year** | **2nd Year** | **3rd Year** | **4th Year** | **5th Year** |
| Total Resources Available from Federal Sources |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Total Resources Available from Other Non-State Sources |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Existing Resources |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| State Resources Available through Internal Allocation and Reallocation |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Student Tuition |       |       |       |       |       |
| *Explanation and Calculations (Note: Tuition calculation should be based on the estimated student demand indicated in section F “Demand for the Program” of this form):* Click here to enter text |
| **TOTAL** |       |       |       |       |       |

|  |  |
| --- | --- |
|   | **Year of Program** |
| **B. Breakdown of Budget Expenses/Requirements** | **1st Year** | **2nd Year** | **3rd Year** | **4th Year** | **5th Year** |
| Administrative/Other Professional Staff |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Faculty |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Graduate Assistants |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Student Employees |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Equipment and Instructional Materials |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Library |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Contractual Services |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Other Support Services |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Commodities |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Printing |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Telecommunications |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Travel |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| Awards and Grants |       |       |       |       |       |
| *Explanation:* Click here to enter text |
| **TOTAL** |       |       |       |       |       |

1. **Program Review and Assessment**

Describe program evaluation procedures for the proposed program. These procedures may include evaluation of courses and faculty by students, administrators, and departmental personnel as appropriate. Plans to implement program review and program outcomes-level student assessment requirements as established by State Regents’ policies should be detailed. Program review procedures shall include standards and guidelines for the assessment of student outcomes implied by the program objectives and consistent with the institutional mission.

Click here to enter text

**Other documents required for dual or joint degree requests**

If requesting a dual or joint degree, attach the New Joint or Dual Program Request cover page.

**APPENDIX A**

**Click here to select your institution**

**CLICK HERE TO ENTER DEGREE DESIGNATION AND PROGRAM NAME**

(i.e. Bachelor of Science in Biomedical Engineering)[[1]](#footnote-1)

|  |  |
| --- | --- |
| **Program Requirements***Asterisk (\*) new courses*. |  |
| **PREFIX AND COURSE NUMBER** | **COURSE TITLE** | **CREDIT HOURS** |
| **General Education** |  |  |
| Click here to enter text | Click here to enter text |  |
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| Click here to enter text | Click here to enter text |  |
|  | **Total** |  |

ADD OR DELETE ROWS AND SECTIONS AS NEEDED

1. Institutions may also attach a copy of the proposed degree sheet in lieu of completing the template. Be sure to asterisks (\*) any new courses. [↑](#footnote-ref-1)