**Appendix D: Curriculum Form**

**Kansas State University**

**(This includes additions, deletions, and changes)**

|  |
| --- |
| Department:  Dept Head Signature:       Date: |
| Contact person(s) for this proposal: |
| Program name: |

**(See below to determine whether this change can go through expedited process)**

**(Please select one of the boxes below)**

**Expedited Process includes, but is not limited to: (CANNOT HAVE IMPACT ON OTHER COLLEGES)**

* Curriculum change
* Other minor changes (to be identified and defended by the department).

**Non- Expedited Process includes, but is not limited to:**

* Changing the required number of credits for completion of a program
* Curriculum change (when this impacts another unit outside the college)
* Addition or deletion of an academic sub plan or plan (option, specialization, minor, certificate, etc.).

**Effective term for requested action:** Term       Year

Please note the following deadlines:

Curriculum Changes effective for: Must be submitted to Faculty Senate Must be approved by

Academic Affairs prior to: Faculty Senate by:

Fall 2nd April meeting May meeting

Spring 2nd September meeting October meeting

Summer 2nd January meeting February meeting

***Please see guidelines in the Kansas Board of Regents (KBOR) policy manual regarding format of new degree program proposals that require KBOR approval (including new majors, secondary majors, and minors not within an existing degree program, etc.)*** [***http://www.kansasregents.org/policy\_chapter\_ii\_a\_new\_academic\_units\_and\_programs***](http://www.kansasregents.org/policy_chapter_ii_a_new_academic_units_and_programs)

**Rationale:** --enter rationale here--

**Impact (i.e. if this impacts another unit) – Statement should include the date when the head of a unit was contacted, and the response or lack of:**

Entire curriculum, curriculum description or admission criteria must be shown below. *Be sure to use current catalog information.*

Strike through the deleted courses or wording within the curriculum description or admission criteria.

Underline new courses, edited version of the curriculum description or admission criteria.

FROM: (Current list of courses for the curriculum, curriculum description, and admission criteria. Be sure to use current catalog information)

TO: To: (Proposed list of courses for the curriculum, curriculum description, and admission criteria.)

|  |  |
| --- | --- |
|  |  |

Please attach additional page(s) if needed.

**For Office Use**

Date approved by Department Faculty:

Date approved by College Course and Curriculum committee:

Date approved by College Faculty (if needed):

Date approved by Graduate Council (if needed):

Date approved by Faculty Senate (if needed):

Date approved by Board of Regents (if needed):