

Letter of Notification

A Letter of Notification is required for programmatic and organizational changes that do not require prior review by the Coordinating Board unless requested. The Letter of Notification with supporting documentation must be submitted to ADHE by the established deadlines. All changes in existing programs/units or requests for new programs/units may be approved by the ADHE Director for immediate implementation and must be included on the agenda of the next scheduled Coordinating Board meeting. This form sets forth the relevant criteria and compliance procedures for institutions submitting letters of notification.

New or Existing Program	Modification					
☐Title or CIP change	☐Joint Bachelo	r/Master's degre	e (3+1 or 4+1 Program	n)		
☐Program reconfiguration-prog	ram created out	of closely allied	existing program(s) *at	ttach copy of "before and after	" curriculum	
Program curriculum revision	or existing progr	am offered onlin	e *attach copy of "before	and after" curriculum		
☐Establishment of administration	ve unit or reorga	nization of existi	ng administrative unit	*attach copy of "before and a	ıfter" organization chart	
☐New certificate program (e.g.	certification of	oroficiency, techi	nical certificate, or grad	duate certificate)		
					e Proposed Change or New Program	
Title of Old Program/Certificate	Degree Code	CIP Code	Title of New Program/Certifica	Degree	e CIP Code	
Accounting, Master of Accountancy	6570	52.0301	NA	NA	NA	
Attach a copy of the "before and at	fter" curriculum,	as applicable				
Program Deletion/Inactive	e or Reactivat	tion			A	
□Delete program(s)/option (s)/e						
□Place program on "Inactive Sta	_					
☐Reactivation of program from						
1 0						
Program/Certificate/Option			and CIP Code	Intended Date	Intended Date of Deletion/Inactivation MM/Y	
_						
				rised to more formally alig e completion of the progi		
نينا			rearest parsaits. At the	1	diff stadents will be	
Establishing a New Off-Ca	ampus Locati	on				
□New Off-Campus Location						
Form Approval(s)						
Formy Montin				10/1	12/15/21	
Terry Martin				12/13/21		
Name of Provost/Chief Academic Off	icer		Signature		Date	
President/Chancellor Approval Date	01/04/22					
Board of Trustee Approval or						
Notification Date	03/17/22					
Institution: University of Ar	kansas, Fayett	eville				
Ketevan Mamiseishvili, Interin (479) 575-2151 kmamisei@uark.edu						
Contact Perso	n/Title	Contact	Phone Number	Contact Email A	ddress	
		NTTACH	SHOW	l		
SAVE	-	ATTACH	ATTACHMENTS			