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.

Please complete the Institution information below and Category 1, 2, or 3, depending on the requested change.

Institution:

| Name of Provost/Chief Academic Of | ficer | Signature | Date | | |
|--|--|--|-----------|--|--|
| President/Chancellor Approval Date | | | | | |
| Board of Trustee Approval/Notification Date | | | | | |
| Contact Person: | Contact Person's Title: | | | | |
| Contact Phone Number: | Contact Email Address | | | | |
| Category 1: New or Existing Progra | m Modification (select all that a | pply) | | | |
| Title or CIP change | | | | | |
| Articulation Agreement: 2+2 3+2 | 4+1 Other * <i>attach copy of N</i> | ЛОU | | | |
| Program reconfiguration *attach copy of | before & after curriculum | | | | |
| Curriculum revision of program/option/emphasis/concentration/minor *attach copy of before and after curriculum | | | | | |
| Existing program offered by distance tec | hnology | | | | |
| Existing certificate or degree program offered at an existing off-campus location | | | | | |
| New option, emphasis, concentration, or | minor | | | | |
| New certificate program (certification of | proficiency, technical certificate, or | graduate certificate) *attach copy of cu | ırriculum | | |
| Effective Term: Effecti | ve Academic Year: | Effective Date (optional): | | | |

| | Before Proposed Changes | After Proposed Changes/New Program |
|-----------------------------------|-------------------------|------------------------------------|
| Program/Certificate Title | | |
| Degree Code | | |
| CIP Code | | |
| % Online (<i>if applicable</i>) | | |

Reason for Proposed Action (attach additional pages as needed)

Delete program/option/emphasis/track

Requires phase-out plan. If program has enrolled students, it will be placed in P = Phase-Out Delete status until it has 0 students.

Change program to Inactive Status

If program has enrolled students, it will be placed in F = Future Inactive status until it has 0 students. A program can be in Inactive Status for a maximum of 5 years. After 5 years, the program will be deleted.

Reactivation of program from inactive status (inactive for less than 5 years)

Effective Term:

Effective Academic Year:

Effective Date (optional):

| Program/Certificate/Option | CIP Code | Degree Code |
|----------------------------|----------|-------------|
| | | |

Reason for Proposed Action (attach additional pages as needed)

Category 3: Instruction/Research/Service Centers and Administrative/Organization Units

Establishment of new instruction, research, or service institute/center that <u>does not</u> serve as a basis for faculty appointments or degree programs. **attach synopsis of center's mission and role, physical address, projected annual budget, and funding sources.* Deletion of instruction, research, or service institute/center. Establishment of administrative/organization unit that <u>does not</u> serve as a basis for faculty appointments or degree programs.

*attach copy of before and after organization chart

Reorganization/Renaming/Deletion of existing administrative/organization unit *attach copy of before and after organization chart

Effective Term:

Effective Academic Year:

Effective Date (optional):

Reason for Proposed Action (attach additional pages as needed)



