

EASTERN MICHIGAN UNIVERSITY  
DIVISION OF ACADEMIC AFFAIRS

OUTLINE FOR SUBMITTING PROPOSALS TO REVISE PROGRAMS

Use this outline to prepare proposals to revise existing programs, including undergraduate majors and minors and graduate degree programs and certificates. Proposals for revising programs should be submitted in narrative form, using the following outline. Guidelines are on the following page.

PROGRAM NAME AND SUBJECT CODE: \_\_\_\_\_

REVISED PROGRAM NAME AND SUBJECT CODE (IF APPLICABLE): \_\_\_\_\_

DEGREE: \_\_\_\_\_

DEPARTMENT(S)/SCHOOL(S): \_\_\_\_\_ COLLEGE(S): \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

REQUESTED START DATE: TERM \_\_\_\_\_ YEAR \_\_\_\_\_

I. Rationale

II. Description of Current Program

III. Proposed Revision

IV. Impact

V. Budget

VI. Action of the Department/College

1. Department/School:

Vote of faculty: For \_\_\_\_\_ Against \_\_\_\_\_ Abstentions \_\_\_\_\_  
(Enter the number of votes cast in each category.)

I support this proposal. The proposed revision can \_\_\_\_\_ cannot \_\_\_\_\_ be implemented within the affected Department(s)/School(s) without additional College or University resources.

\_\_\_\_\_  
Department Head/School Director Signature

\_\_\_\_\_  
Date

2. College/Graduate School:

A. College

I support this proposal. The proposed program can \_\_\_\_\_ cannot \_\_\_\_\_ be implemented within the affected College without additional University resources.

\_\_\_\_\_  
College Dean Signature

\_\_\_\_\_  
Date

**B. Graduate School (Graduate Program Revisions ONLY)**

\_\_\_\_\_  
Graduate Dean Signature

\_\_\_\_\_  
Date

---

**VII. Approval**

\_\_\_\_\_  
Associate Vice-President for Academic Programming Signature

\_\_\_\_\_  
Date

---

**VIII. Appendices**

- A. Market Analysis/Needs Assessment
- B. Mandates
- C. Request for New/Revised Course Forms
- D. Letters of Support from Impacted Departments
- E. Cost Analysis (Complete only if the revision cannot be implemented without additional University resources. Fill in Estimated Resources for the sponsoring department(s). Attach separate estimates for other affected departments.)

Estimated Resources:	Year One	Year Two	Year Three
Faculty / Staff	\$ _____	\$ _____	\$ _____
SS&M	\$ _____	\$ _____	\$ _____
Equipment	\$ _____	\$ _____	\$ _____
<b>Total</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

**EASTERN MICHIGAN UNIVERSITY  
DIVISION OF ACADEMIC AFFAIRS**

**DIRECTIONS FOR PREPARING PROPOSALS TO REVISE DEGREE PROGRAMS**

Departments/Schools intending to submit proposals for revising programs are encouraged to consult with the Course and Program Development Office and, if appropriate, the Graduate School prior to submitting such proposals. Proposals for program revisions should be submitted in narrative form, according to the following guidelines:

**I. Rationale:** Explain completely the rationale for the proposed revision. If it is the result of a market analysis or needs assessment, include documentation as Appendix A. If the revision is the result of state of Michigan, federal or accrediting agency mandate, attach documentation, including required implementation date, as Appendix B.

**II. Description of Current Program:** Describe the current program as it appears in the most recent University catalog. Include information about major/minor requirements, restricted and general electives, and the minimum number of total credit hours students completing the program will have taken by the time they graduate.

**III. Proposed Revision:** Provide a complete description of the revised program, organized so that the current and revised programs can easily be compared. Include a list of any new or revised courses. Indicate whether the proposed revision will increase the number of credit hours in the program, and provide a rationale for any increase.. Attach completed Request for New Course and/or Request for Course Revision form for each proposed new or revised course as Appendix C.

**IV. Impact:** Indicate whether and how the proposed revision will impact other University programs. Attach letters of support from affected departments as Appendix D.

**V. Budget:** Describe the budgetary impact of the proposed revision. If new resources will be needed, indicate their source. If the revision will require resources beyond those the department/school or college can provide, attach a cost analysis as Appendix E. (**Note:** If a significant portion of the cost of the revised program will be borne by Continuing Education, include evidence of Continuing Education's willingness to bear those costs.)