

*Submit proposals to:* Office of Academic Programs, Assessment, and Accreditation

 314 Waldo Hall – Oregon State University

**Proposal Transmittal Sheet**

**Full Category I and Abbreviated Category I Proposals**

Attach Transmittal Sheet; Proposal; Library Evaluation (performed by the Library for Full Category I proposals), Letters of Support (external to OSU); Liaison Correspondence (internal to OSU), External Review (new graduate program proposals), and Budget Information (both OSU and HECC budget sheets for Full Category I proposals and OSU budget sheets for Abbreviated Category I proposals)

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| --- | --- |
| **Full Category I Proposals: New Programs***Final Approval--*for new degrees, extension to OSU’s branch campus, and substantive changes: Higher Education Coordinating Commission (HECC)*Final Approval--* for new certificate programs: OSU Provost | **Abbreviated Category I Proposals:** **Other Proposals***Final Approval--*for new academic units, renames, reorganizations, and, suspensions: OSU Provost*Final Approval*-- for terminations: OSU Board of Trustees |
|  |  **Check one:** **New Degree Program** **New Certificate Program** **Extend Program to OSU Branch Campus** **Substantive Change**  |        |  **Check one:** **Establish:** new college, school, department or program **Rename**: change the name of an existing academic program or academic unit **Reorganization:** move the responsibility of an academic program from one academic unit to another; reorganize existing academic unit(s), including mergers and splits **Suspension (or Reactivation):**  suspend an academic program (maximum period: three years) **Termination:** terminate an academic program or academic unit |

X

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**Title of Proposal:**  **Proposed Effective Term:**

**School/Department/Program:** **College:**

***I certify that the above proposal has been reviewed by the appropriate Program, Department, School, and College administrators and committees. I approve this proposal.***

***Sign (Department/School Chair/Head; Director) Date* Print (Chair/Headead; Director)**

***Sign* (College Dean)  *Date* Print (College Dean)**