University of Nebraska-Lincoln

Modification of Graduate Specialization

# I. Descriptive Information

|  |
| --- |
| **Name of the Current Area of Specialization** |
|  |
| **Current Specialization is** |
| \_\_\_\_\_Masters \_\_\_\_\_Doctoral \_\_\_\_\_Both |
| **Degrees(s) Currently Offered** |
|  |
| **Name of the Proposed Area of Specialization** |
|  |
| **Proposed Specialization is** |
| \_\_\_\_\_Masters \_\_\_\_\_Doctoral \_\_\_\_\_Both |
| **Degrees(s) to be Offered** |
|  |
| **Other Programs Offered in this Field by this Institution** |
|  |
| **Primary Administrative Unit for the Proposed Graduate Specialization** |
|  |
| **All Units Participating in the Graduate Specialization** |
|  |
| **Names of the Advisory Committee Members** |
|  |
| **Proposed Delivery Site** |
|  |
| **Graduate Specialization will be Offered** *[Full program, not individual courses]* |
| \_\_\_On-campus only \_\_\_Distance only \_\_\_Both (on-campus and distance) |
| **Proposed Date Modification will be Initiated** |
| *[term/year]* |

# II. Details

1. **Description of the Proposed Modification**

*[Include the plan for implementation]*

1. **Justification of the Proposed Modification**

**! The following sections are only required for mergers/consolidation or other substantial modifications**

# III. Additional Details

1. **Content and Format of the Program**

*[What are the educational goals and objectives of the proposed specialization?*

*List the courses that will be offered in the specialization.*

|  |
| --- |
| *List specific required or elective courses in the masters/PhD program and specialization.* *Add lines as necessary.* |
| Course Number | Masters/PhD Credit# Credit Hours | Specialization Credit# Credit Hours |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total** |  |  |

*Are there guidelines or accreditations for such programs? If so, will this program meet the established standards?*

*Outline the requirements for students enrolled in the specialization]*

1. **General Governance Procedures**

*[Describe the role of the faculty in the conduct of the specialization. Describe the admissions and advising procedures of students in the specialization.]*

1. **Availability of Resources and Funding**

*[What resources are necessary to make this program viable (library holdings, space requirements, special equipment or renovations, etc.)? Are these resources now available and, if not, how can they be obtained?]*

1. **Impact on Existing Academic Community**

*[What interactions will take place with other departments, units, and programs on all campuses? What participation will be required in terms of faculty from other programs? (Provide letters documenting willingness to participate.) What steps have been taken to insure that the proposed specialization does not overlap existing programs? (Documentation must be provided that relevant departments or areas have been informed of the proposal.]*

# IV. Review Criteria

1. **Evidence of Need and Demand**
2. **Availability of Resources and Funding**

*[What resources are necessary to make this program viable (library holdings, space requirements, special equipment or renovations, etc.)? Are these resources now available and, if not, how can they be obtained?]*

1. **Impact on Existing Academic Community**

*[What interactions will take place with other departments, units, and programs on all campuses? What participation will be required in terms of faculty from other programs? (Provide letters documenting willingness to participate.) What steps have been taken to insure that the proposed specialization does not overlap existing programs? (Documentation must be provided that relevant departments or areas have been informed of the proposal.]*

**!**

When submitting to the Office of the Graduate Studies, submit

* Supporting letter from department/graduate chair, electronically
* Transmittal memo from college dean, electronically
* Proposal form as a word document, electronically
* Supporting documentation as a PDF, electronically
* All documents listed above, hard copies with original signatures where appropriate