UNIVERSITY FACULTY SENATE FORMS

Academic Program Approval

This form is a routing document for the approval of new and revised academic programs. Proposing department should complete this form. For more information, call the Faculty Senate Office at 831-2921.

Submitted by: ________ John Bishop _______________ phone number ________ 8544

Department: _______ Individual & Family Studies _______________ email address jbbishop@udel.edu

Action: __________ Delete Concentration
(Example: add major/minor/concentration, delete major/minor/concentration, revise major/minor/concentration, academic unit name change, request for permanent status, policy change, etc.)

Effective term __________ 08F
(use format 04F, 05W)

Current degree ______________________ M.S. in Human Development & Family Studies
(Example: BA, BACH, BACJ, HBA, EDD, MA, MBA, etc.)

Proposed change leads to the degree of: __________________________________________
(Example: BA, BACH, BACJ, HBA, EDD, MA, MBA, etc.)

Proposed name:_______________________________________________________________
Proposed new name for revised or new major / minor / concentration / academic unit
(if applicable)

Revising or Deleting:

Undergraduate major / Concentration: __________________________________________
(Example: Applied Music – Instrumental degree BMAS)

Undergraduate minor:________________________________________________________
(Example: African Studies, Business Administration, English, Leadership, etc.)

Graduate Program Policy statement change: ______________________________________
(Must attach your Graduate Program Policy Statement)

Graduate Program of Study:____________________________________________________
(Example: Animal Science: MS Animal Science: PHD Economics: MA Economics: PHD)

Graduate minor / concentration: _______ Applied Family & Community Studies
Note: all graduate studies proposals must include an electronic copy of the Graduate Program Policy Document, highlighting the changes made to the original policy document.

N/A

List new courses required for the new or revised curriculum. How do they support the overall program objectives of the major/minor/concentrations? (Be aware that approval of the curriculum is dependent upon these courses successfully passing through the Course Challenge list. If there are no new courses enter “None”)

None

Explain, when appropriate, how this new/revised curriculum supports the 10 goals of undergraduate education: http://www.ugs.udel.edu/gened/

None

Identify other units affected by the proposed changes:
(Attach permission from the affected units. If no other unit is affected, enter “None”)

None

Describe the rationale for the proposed program change(s):
(Explain your reasons for creating, revising, or deleting the curriculum or program.)

The Individual and Family Studies department conducted a self-evaluation of its’ graduate programs in the spring of 2007 as a part of an Academic Program Review (APR) process. The resultant report, dated May 21, 2007, was unanimously endorsed by the faculty. That report recommended that three of the current concentrations for the M.S. in Human Development and Family Studies be discontinued, with only the masters in Family and Human Development Research being retained. Subsequently, an off-campus review team conducted a separate review of the department’s plan (September 30 through October 3, 2007) as a part of the APR process. The report of the team of consultants supported the plan to dissolve three of the M.S. concentrations because having “four concentrations is unnecessarily burdensome in a unit that seeks to add depth to two areas of concentration at the PH.D. level.” The APR team did support the recommendation to retain the M.S. concentration in Family and Human Development Research.

Program Requirements:
(Show the new or revised curriculum as it should appear in the Course Catalog. If this is a revision, be sure to indicate the changes being made to the current curriculum and include a side-by-side comparison of the credit distribution before and after the proposed change.)

**ROUTING AND AUTHORIZATION:** (Please do not remove supporting documentation.)

Department Chairperson ___________________________ Date __________________

Dean of College __________________________________ Date __________________

Chairperson, College Curriculum Committee ________________ Date ________________

Chairperson, Senate Com. on UG or GR Studies __________________________ Date ________________