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: _Kenneth Miller	phone numberx 8506
Department:Nursing	email addresskpmiller@udel.edu
Action:add concentration to existing RN to MSN prog (Example: add major/minor/concentration, d major/minor/concentration, academic unit name chang	lelete major/minor/concentration, revise
Effective term08F (use format 04F, 05W)	
Current degree(Example: BA, BACH, BACJ, HB	A, EDD, MA, MBA, etc.)
Proposed change leads to the degree of: BSN a	and MSN
(Exam	ple: BA, BACH, BACJ, HBA, EDD, MA, MBA, etc.)
(if applicable) Revising or Deleting:	
(Exampl	e: Applied Music – Instrumental degree BMAS)
Undergraduate minor: (Example: African Studie	es, Business Administration, English, Leadership, etc.)
Graduate Program Policy statement ch	nange: (Must attach your Graduate Program Policy Statement)
Graduate Program of Study: (Example: Animal Science: MS Ani	mal Science: PHD Economics: MA Economics: PHD)
Graduate minor / concentration: _add: the existing Master in Science in Nursing for the	Health Services Administration concentration to Registered Nurse (BSN/MSN)
Note: all graduate studies proposals must incl	ude an electronic copy of the Graduate

Program Policy Document, highlighting the changes made to the original policy document.

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: <u>http://www.ugs.udel.edu/gened/</u>

See attached report

Identify other units affected by the proposed changes:

(Attach permission from the affected units. If no other unit is affected, enter "None")

See attached report

Describe the rationale for the proposed program change(s):

(Explain your reasons for creating, revising, or deleting the curriculum or program.)

See attached report

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.)

See attached report

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
Chairperson, Senate Coordinating Com	Date
Secretary, Faculty Senate	Date
Date of Senate Resolution	Date to be Effective
Registrar Program Code	Date
Vice Provost for Academic Affairs & International Programs	Date
Provost	Date
Board of Trustee Notification	_Date

Revised 10/23/2007 /khs