

PROCESS

- Please complete and attach all required documentation before sending to the Dean's Office.
- For details, refer to the Provost's page under *NEW PROGRAM DEVELOPMENT AND PROGRAM REVISION RESOURCES* (<https://www.une.edu/provost/resources#review>)
- Once approved, scan and email to the Registrar's Office: Registrar@une.edu

PROGRAM INFORMATION

Effective Academic Catalog Year	
Name of New, Revised or Ending Program	
Type of Program	
Status	
Level of Study	
Degree or Cert. Earned (B.A., M.A. ...etc.)	
College	
Academic Department/School (if applicable)	
Primary Campus	

SECTION I: COURSE INFORMATION

Provide a Copy of the Feasibility Study, Current Catalog Copy, and New Degree Plan (if applicable)	**Attach Electronically**					
Provide a Copy of the Rationale for Revisions (if revision is less than a 50% curriculum change)	**Attach Electronically**					
Provide Rationale, Timing, and Teach-out Plan for a Program Closure (if applicable)	**Attach Electronically**					
This Program has been discussed with: (check all that apply)	<input type="checkbox"/>	Financial Planning	<input type="checkbox"/>	Admissions	<input type="checkbox"/>	Registrar
	<input type="checkbox"/>	Student Financial Services	<input type="checkbox"/>	ITS	<input type="checkbox"/>	SASC
	<input type="checkbox"/>	Institution Research	<input type="checkbox"/>	Library	<input type="checkbox"/>	Facilities

SECTION II: REQUIRED SIGNATURES

Academic Dean Signature: _____ **Date:** _____

Provost Signature: _____ **Date:** _____

New, Revised, or Ending Program Request Form

The University of New England | Office of the Registrar
11 Hills Beach Road (Decary Hall, 114) Biddeford, ME 04005
Phone: (207) 602-2473 | Fax: (207) 602-5927 | Registrar@une.edu

REGISTRAR'S OFFICE ONLY:

College code:	Degree code:	Program code:
Department code:	Major/Minor code:	Concentration code:
CIP code:	Catalog & class year:	Reg initials, date: