



Directions for submitting a request for approval of undergraduate degrees/degree programs

Public institutions requesting approval from the Chancellor of the Ohio Department of Higher Education to deliver undergraduate programs are required to complete and submit the enclosed proposal as part of the approval process. If the institution has not already done so, it must submit an Initial Inquiry to begin the review process. Questions about the Initial Inquiry or the proposal template may be submitted to Matt Exline, director for program approval operations, at (614) 728-3095 or mexline@highered.ohio.gov. Once the initial inquiry is received, an institutional mentor will be assigned to the institution to assist in the development and review of the request.

Depending on the nature of the request, the institution may be asked to submit additional information in the form of a **supplement or supplements** (e.g., online course offerings, off-campus locations, flexible delivery schedules etc.). The institutional mentor will assist the institution in determining what forms are needed to complete the review the process.

If the request also requires the approval of the Higher Learning Commission (HLC), or if the institution also intends to pursue programmatic/specialized accreditation for the request, the institution may submit materials prepared for HLC or the programmatic/specialized accrediting body in lieu of submitting this proposal and any applicable supplement forms.

If the institution is submitting a request for an **educator preparation program**, additional information will be requested to complete the review.

The institutional mentor will provide directions for submitting the request. Electronic submission of all review materials is required. The proposal itself must remain a Microsoft Word document. Appendix items should be clearly labeled and may be submitted as Microsoft Office documents (e.g., Word or Excel) or as PDF documents. If the electronic documents are too numerous or too cumbersome to email, you may copy them to a USB drive and then mail the drive to our office.

**REQUEST FOR APPROVAL
SUBMITTED BY:**

(Insert name of institution)

(Insert degree designation and program/major/track name)

(Insert date of submission to ODHE)

REQUEST

Date of submission:

Name of institution:

Degree/degree program title:

Six-digit CIP code (format: XX.XXXX):

Approved/existing programs with same first two CIP code digits (format: CIP code, program name):

Total Number of Hours in Program:

Primary institutional contact for the request

Name:

Title:

Phone number:

E-mail:

Delivery sites:

(List all sites where the proposed program will be delivered)

Date that the request was approved by the institution's governing board (e.g. Board of Trustees, Board of Directors):

Proposed start date:

**The expectation is that a program will start within one year of Chancellor approval. Please contact the Chancellor's staff to request an extension.*

Institution's programs: *(e.g., associate, bachelor's, master's, doctorate)*

Educator Preparation Programs:

Indicate the program request leads to educator preparation licenses or endorsements.

Licensure **Yes/No**

Endorsement **Yes/No**

SECTION 1: INTRODUCTION

1.1 *Provide a brief summary of the request that will serve as an introduction for the reviewers.*

SECTION 2: ACCREDITATION

2.1 Regional accreditation

- *Original date of accreditation:*
- *Date of last review:*
- *Date of next review:*

2.2 Results of the last accreditation review

- *Briefly describe the results of the institution's last accreditation review and submit the results (e.g., agency report, accreditation letters, requests for follow-up, etc.) as an appendix item.*

2.3 Notification of appropriate agencies

- *Provide a statement indicating that the appropriate agencies (e.g., regional accreditors, specialized accreditors, state agencies, etc.) have been notified of the institution's request for authorization of the new program. **Provide documentation of the notification as an appendix item.***

SECTION 3: LEADERSHIP—INSTITUTION

3.1 Mission statement

- *Insert/describe the institution's mission statement.*

3.2 Organizational structure

- *Provide a copy of the institution's organizational chart as an appendix item.*

SECTION 4: ACADEMIC LEADERSHIP—PROGRAM

4.1 Organizational structure

- *Describe the organizational structure of the proposed program. In your response, indicate the unit that the program will be housed within and how that unit fits within the context of the overall institutional structure. Further, describe the reporting hierarchy of the administration, faculty, and staff for the proposed program.*
- *Provide the title of the lead administrator for the proposed program and a brief description of the individual's duties and responsibilities. Include this individual's CV/resume as an appendix item.*
- *Describe any councils, committees, or other organizations that support the development and maintenance of the proposed program. In your response, describe the individuals (by position) that comprise these entities, the terms of their appointment, and the frequency of their meetings.*

4.2 Program development

- *Describe how the proposed program aligns with the institution's mission.*
- *Indicate whether the institution performed a needs assessment/market analysis to determine a need for the program. If so, briefly describe the results of those findings. If completed, submit the full analysis as an appendix item.*
- *Indicate whether the institution consulted with advisory groups, business and industry, or other experts in the development of the proposed program. If so, briefly describe the involvement of these groups in the development of the program.*
- *Indicate whether the proposed program was developed to align with the standards of a specialized or programmatic accreditation agency. If so, indicate whether the institution plans to pursue programmatic/specialized accreditation for the proposed program and provide a timeline for achieving such accreditation. If the program is already accredited, indicate the date that accreditation was achieved and provide information on the next required review.*

4.3 Collaboration with other Ohio institutions

- *Indicate whether any public institution(s) within a thirty-mile radius of your institution offers the proposed program. If so, list the institutions that offer the proposed program and provide a rationale for offering an additional program at this site.*
- *Indicate whether the proposed program was developed in collaboration with another institution in Ohio. If so, briefly describe the involvement of each institution in the development of this request and the delivery of the program.*

SECTION 5: STUDENT SERVICES

5.1 Admissions policies and procedures

- *Describe the admissions requirements for the program. In your response, highlight any differences between the admission requirements for the program and for the institution as a whole.*
- *Describe the transfer credit policies for the proposed program, including the use of credit transfer review committees and the maximum number of hours that can be transferred into the program. In your response, specifically address the credit that may be transferred*
 - *according to the Department of Higher Education' Transfer Assurance Guide (TAG) and Career Technical Credit Transfer (CT²) initiatives; and*
 - *other types of transfer credit awarded toward major program requirements (e.g., AP, life experience, CLEP, portfolio, etc.).*

5.2 Student administrative services

- *Indicate whether the student administrative services (e.g., admissions, financial aid, registrar, etc.) currently available at the institution are adequate to support the program. If new or expanded services will be needed, describe the need and provide a timeline for acquiring/implementing such services.*

5.3 Student academic services

- *Indicate whether the student academic services (e.g., career services, counseling, tutoring, ADA, etc.) currently available at the institution are adequate to support the program. If new or expanded services will be needed, describe the need and provide a timeline for acquiring/implementing such services.*

SECTION 6: CURRICULUM

6.1 Introduction

- *Provide a brief description of the proposed program as it would appear in the institution's catalog.*

6.2 Program goals and objectives

- *Describe the goals and objectives of the proposed program. In your response, indicate how these are operationalized in the curriculum.*

6.3 Course offerings/descriptions

- *Complete the following table to indicate the courses that comprise the program. Please list courses in groups by type (e.g., major/core/technical, general education, elective) and indicate if they are new or existing courses. Please do not remove any columns from the table below and ensure that all fields are complete.*

Course (name/number)	No. of credit hours (q/s)	Major/ Core/ Technical	General Education	Elective	OTM, TAG or CT ² equivalent course	New/Existing Course
<i>e.g., MTH130: Statistics</i>	<i>e.g., 3s</i>		X		X	<i>e.g., Existing</i>
<i>e.g., BUS150: Intro to Management</i>	<i>e.g., 3s</i>	X			X	<i>e.g., Existing</i>
<i>e.g., BUS350: Managing Healthcare Facilities</i>	<i>e.g., 3s</i>			X		<i>e.g., New</i>

Provide a brief description of each course in the proposed program as it would appear in the course catalog. In your response, include the name and number of the course. **Submit course syllabi as appendix items.**

6.4 Program sequence

Provide the intended/ideal sequence to complete the program in the table below. An example is provided. Add additional time periods as needed. Please be sure to spell out the course name.

Time period	Curriculum component	Time period	Curriculum component
<i>e.g., Year 1 Fall Semester</i>	Courses/Activities	<i>e.g., Year 1 Spring Semester</i>	Courses/Activities
	<i>BIO 145: Biology</i>		
	<i>BUS150: Intro to Management</i>		
	<i>PSY100: Intro to Psychology</i>		
	<i>MTH 130: Statistics</i>		
Time period	Curriculum component	Time period	Curriculum component
<i>e.g., Year 2 Fall Semester</i>	Courses/Activities	<i>e.g., Year 2 Spring Semester</i>	Courses/Activities

Time period	Curriculum component	Time period	Curriculum component
<i>e.g., Year 3 Fall Semester</i>	Courses/Activities	<i>e.g., Year 3 Spring Semester</i>	Courses/Activities
Time period	Curriculum component	Time period	Curriculum component
<i>e.g., Year 4 Fall Semester</i>	Courses/Activities	<i>e.g., Year 4 Spring Semester</i>	Courses/Activities

Total Number of credits in the program _____

6.5 Alternative delivery options (please check all that apply):

- More than 50% of the program will be offered using a fully online delivery model
- More than 50% of the program will be offered using a hybrid/blended delivery model
- More than 50% of the program will be offered using a flexible or accelerated delivery model

For the purposes of this document, the following definitions are used:

- *an **online course** is one in which most (80+%) of the content is delivered online, typically without face-to-face meetings;*
- *a **hybrid/blended course** is one that blends online and face-to-face delivery, with substantial content delivered online;*
- *a **flexible or accelerated program** includes courses that do not meet during the institution’s regular academic term as well as courses that meet during the regular academic term but are offered in a substantially different manner than a fixed number of meeting times per week for all the weeks of the term.*

6.5 Off-site program components (please check all that apply):

- Co-op/Internship/Externship
- Field Placement
- Student Teaching
- Clinical Practicum
- Other

SECTION 7: ASSESSMENT AND EVALUATION

7.1 Program assessment

- *Describe the policies and procedures in place to assess and evaluate the proposed program. In your response, include the following:*
 - *Name of the unit/position responsible for directing assessment efforts;*
 - *Description of any committees or groups that assist the unit;*
 - *Description of the measurements used;*
 - *Frequency of data collection;*
 - *Frequency of data sharing; and*
 - *How the results are used to inform the institution and the program.*

7.2 Measuring student success

- *Describe the policies and procedures in place to measure individual student success in the proposed program. In your response, include the following:*
 - *Name of the unit/position responsible for directing these efforts;*
 - *Description of any committees or groups that assist the unit;*
 - *Description of the measurements used;*
 - *Frequency of data collection;*
 - *Frequency of data sharing;*
 - *How the results are used to inform the student as they progress through the program; and*
 - *Initiatives used to track student success after program completion.*

SECTION 8: FACULTY

8.1 Faculty appointment policies

- *Describe the faculty designations available (e.g., professor, associate professor, adjunct, instructor, clinical, etc.) for the proposed program's faculty. In your response, define/describe the differences between the designations.*
- *Describe the credentialing requirements for faculty who will be teaching in the program (e.g., degree requirements, special certifications or licenses, experience, etc.).*
- *Describe the institution's load/overload policy for faculty teaching in the proposed program.*
- *Indicate whether the institution will need to identify additional faculty to begin the proposed program. If additional faculty members are needed, describe the appointment process and provide a timeline for hiring such individuals.*

8.2 Program faculty

- Provide the number of existing faculty members available to teach in the proposed program.

Full-time:

Less than full-time:

- Provide an estimate of the number of faculty members to be added during the first two years of program operation.

Full-time:

Less than full-time:

8.3 Expectations for professional development/scholarship

- Describe the institution's general expectations for professional development/scholarship activities by the proposed program's faculty. In your response, describe any differences in the expectations for tenure-track vs. non tenure-track faculty and for full-time vs. part-time faculty. Indicate the financial support provided for such activities. **Include a faculty handbook outlining the expectations and documenting support as an appendix item.**

8.4 Faculty matrix

- Complete a faculty matrix for the proposed program. A faculty member must be identified for each course that is a required component of the curriculum. If a faculty member has not yet been identified for a course, indicate that as an "open position" and describe the necessary qualifications in the matrix (as shown in the example below). Generally a **copy of each faculty member's CV should be included as an appendix item. Please check with ODHE staff to determine if all vita are needed. The vita of the program director should be included. Please do not remove any columns from the table below. All fields are required.**

Name of Instructor	Rank or Title	Full-Time or Part-Time	Degree Titles, Institution, Year Include the Discipline/Field as Listed on the Diploma	Years of Teaching Experience In the Discipline/Field	Additional Expertise in the Discipline/Field (e.g., licenses, certifications, if applicable)	Title of the Course(s) This Individual Will Teach in the Proposed Program Include the course prefix and number	Number of Courses this Individual will Teach Per Year at <u>All</u> Campus Locations
<i>e.g., John Smith</i>	<i>e.g., Professor, Assistant</i>	<i>FT or PT</i>	<i>e.g., M.S., Mathematics,</i>	<i>e.g., 6</i>		<i>e.g., MTH120: College Algebra</i>	<i>e.g., 7</i>

	<i>Professor, Adjunct Professor, Lecturer, etc.</i>		<i>ABC University, 1990</i>			<i>MTH148: Analytic Geometry</i>	
<i>Open Position</i>	<i>e.g., Professor, Assistant Professor, Adjunct Professor, Lecturer, etc.</i>	<i>FT or PT</i>	<i>e.g., Master's in English required</i>	<i>e.g., 3 years minimum</i>		<i>e.g., ENG 100: English Composition I, English Composition II</i>	<i>e.g., 4</i>

SECTION 9: LIBRARY RESOURCES AND INFORMATION LITERACY

9.1 Library resources

- *Describe the involvement of a professional librarian in the planning for the program (e.g., determining adequacy of current resources, working with faculty to determine the need for additional resources, setting the budget for additional library resources/services needed for the program).*
- *Describe the library resources in place to support the proposed program (e.g., print, digital, collections, consortia, memberships, etc.).*
- *Describe any additional library resources that will be needed to support the request and provide a timeline for acquiring/implementing such services. Where possible, provide a list of the specific resources that the institution intends to acquire, the collaborative arrangements it intends to pursue, and monetary amounts the institution will dedicate to the library budget to support and maintain the proposed program.*

9.2 Information literacy

- *Describe the institution's intent to incorporate library orientation and/or information literacy into the proposed program. In your response, describe any initiatives (e.g., seminars, workshops, orientations, etc.) that the institution uses or intends to use for faculty and students in the program.*

SECTION 10: BUDGET, RESOURCES, AND FACILITIES

10.1 Resources and facilities

Describe additional resources (e.g., classrooms, laboratories, technology, etc.) that will be needed to support the proposed program and provide a timeline for acquiring/implementing such resources.

10.2 Budget/financial planning

Complete the table on the following page to describe the financial plan/budget for the first four years of program operation.

Fiscal Impact Statement for New Degree Programs
Please insure all columns and fields are completed.

	Year 1	Year 2	Year 3	Year 4
I. Projected Enrollment				
Head-count full time				
Head-count part time				
Full Time Equivalent (FTE) enrollment				
II. Projected Program Income				
Tuition (paid by student or sponsor)				
Expected state subsidy				
Externally funded stipends, as applicable				
Other income (if applicable, describe in narrative section below)				
Total Projected Program Income				
III. Program Expenses				
New Personnel				
• Instruction (technical, professional and general education)				
Full ____				
Part Time ____				
• Non-instruction (indicate role(s) in narrative section below)				
Full ____				
Part time ____				
New facilities/building/space renovation (if applicable, describe in narrative section below)				
Scholarship/stipend support (if applicable, describe in narrative section below)				
Additional library resources (if applicable, describe in narrative section below)				
Additional technology or equipment needs (if applicable, describe in narrative section below)				
Other expenses (if applicable, describe in narrative section below)				
Total Projected Expense				

Budget Narrative:

(Use narrative to provide additional information as needed based on responses above.)

Commitment to Program Delivery

Provide a statement of the institution's intent to support the program and assurances that, if the institution decides in the future to close the program, the institution will provide the necessary resources/means for matriculated students to complete their degree.

Verification and Signature

(Insert name of the institution) verifies that the information in the application is truthful and accurate.

Signature of the Chief Presiding Officer or the Chief Academic Officer

(Insert name and title of the chief presiding or chief academic officer)