# New Academic Degree Program Request for Planning Authorization

**Institution Name:**

**Degree and Program Name (e.g., Master of Science in Biology):**

**Abbreviation (e.g., M.A.):**

Reviewer information*(No signatures required in this section.)*

|  |  |  |
| --- | --- | --- |
| **Reviewer** | **Name** | **Title** |
| **Program Director** |  |  |
| **Department Head/Chair** |  |  |
| **Academic College/School Dean** |  |  |
| **Graduate/Undergraduate Dean** (If applicable) |  |  |
| **Graduate Council (If applicable)** |  |  |
| **Faculty Senate Chair (Or appropriate faculty body)** |  |  |
| **Chief Financial Officer** |  |  |

New Academic Proposal Process
New academic programs are initiated and developed by faculty members. The Request for Planning Authorization must be reviewed and approved by the appropriate individuals listed above before submission to the UNC System Office for review.

Please provide a succinct, yet thorough, response to each section. Obtain signatures from the chancellor and provost and submit the proposal via the Program Establishment Portal (PREP) system to the UNC System vice president for academic affairs, for review and approval by the UNC System Office. If the Request for Planning Authorization is approved, the institution may submit the formal Request to Establish a New Academic Degree Program.

Proposals for academic programs must include the following metrics: Program to Occupation Mapping, Student Demand Analysis, Workforce Alignment, Education Premium Analysis, and Student Return on Investment (ROI) Analysis. These metrics are outlined in 400.1: Policy on Academic Program Planning and 400.1.1[R]: Regulation for Academic Program Planning and Evaluation.

**NOTE: If an institution is requesting planning authorization for a degree program at a higher level than their current Carnegie Classification (e.g., a master’s institution proposing a doctoral degree), then a request for a mission review must first be submitted to the University of North Carolina Board of Governors Committee on Educational Planning, Programs, and Policies, through the senior vice president for academic affairs. If approved by the UNC Board of Governors, then the institution may proceed with the Request for Planning Authorization.**

|  |  |
| --- | --- |
| **Institution Name** |  |
| **Institutional Accreditor**  |  |
| **Joint Degree Program (Yes or No)? If so, list partner institution.** |  |
| **Degree and Program Name (e.g., M.A. in Biology)** |  |
| **CIP Code and CIP Title (May be found at** [**National Center for Education Statistics**](https://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55)**)** |  |
| **Require UNC Teacher Licensure Specialty Area Code (Yes or No). If yes, list suggested UNC Specialty Area Code(s).** |  |
| **Proposed Delivery Mode (campus, online, or site-based distance education). Add percentage for online and/or site-based, if applicable.** |  |
| **Will this program be offered by Project Kitty Hawk or an outside provider? If yes, list the provider.** |  |
| **What is the intended date for the UNC Board of Governors to review the proposed program?** **(Consult the** [**Academic Program Planning Calendar**](https://www.northcarolina.edu/academic-programs/) **to determine the estimated date.)** |  |
| **Proposed Term to Enroll First Students (e.g., fall 2026)** |  |

1. **Accreditor Liaison Statement**

Provide a brief statement from the university accreditor liaison regarding whether the proposed program is or is not a substantive change.

1. **Program Summary**

Briefly describe the proposed program and summarize the overall rationale. *Maximum of 1,000 words*.

Address the following in your narrative:

1. How does this proposed program support specific university and UNC System [missions?](https://www.northcarolina.edu/institutions/)
2. Discuss collaborative opportunities with other UNC System institutions as appropriate.
3. How is the proposed program distinct from others already offered in the UNC System? Information on other programs may be found on the UNC System [website](https://www.northcarolina.edu/apps/programs/index.php), and all similar programs should be listed here (use the 4-digit CIP as a guide).
4. How does the proposed program align with the UNC System [strategic plan?](https://www.northcarolina.edu/impact/strategic-plan/)
5. **Program to Occupation Analysis**

*Maximum length 250 words.*

* 1. Why is this CIP selected for this particular degree program? How does the proposed program fit within this CIP?
	2. Identify corresponding SOC and relevant job titles. Provide rationale for SOCs that do not match with the CIP.
1. **Student Demand Analysis**

Provide evidence of student enrollment demand; discuss the extent to which students will be drawn from a pool of students not previously served by the institution. Please use table formats below to provide data on: (1) enrolled/completed for undergraduate and graduate students; graduate degree program proposals must also include applied and admitted counts for graduate students; (2) undergraduate and graduate must show completions for similar CIPs from UNC Board of Governors approved [peer institutions](https://www.northcarolina.edu/wp-content/uploads/reports-and-documents/academic-affairs/unc-peer-institution-study_may-2025.pdf). *Maximum length 250 words.*

**Table 1. Other UNC System Applied/Admitted /Enrolled for CIP xx.xxxx— [insert CIP title]**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Institution\*** | **Degree Level** | **Counts** | **AY (e.g., 22-23)** | **AY (e.g., 23-24)** |
| Institution A | Insert degree level | Applied  | Insert # | Insert # |
| Institution A | Insert degree level | Admitted  | Insert # | Insert #  |
| Institution A | Insert degree level | Enrolled  | Insert # | Insert # |
| Institution B | Insert degree level | Applied  |  Insert # | Insert #  |
| Institution B | Insert degree level | Admitted  | Insert # | Insert #  |
| Institution B | Insert degree level | Enrolled  |  Insert # | Insert #  |
| Institution C | Insert degree level | Applied  |  Insert # | Insert #  |
| Institution C | Insert degree level | Admitted  |  Insert # | Insert #  |
| Institution C | Insert degree level | Enrolled  |  Insert # | Insert # |

\*List all institutions with similar degrees in the same CIP. Use a 4-digit CIP comparison, if

there are no comparisons use the 2-digit CIP

**Table 2. Other UNC System Completions for [insert degree level, e.g. Bachelor’s], CIP xx.xxxx— [Insert CIP title]**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Institution\*** | **Degree Level** | **Counts** | **AY (e.g., 18-19)** | **AY (e.g., 19-20)** | **AY (e.g., 20-21)** | **AY (e.g., 21-22)** | **AY (e.g., 22-23)** |
| Institution A | Insert degree level | Completions | Insert #  | Insert # | Insert# | Insert# | Insert# |

  \*List all institutions with similar degrees in the same CIP.

**Table 3. IPEDS Peer Institutions Completions for [insert degree level, e.g. Bachelor’s] CIP xx.xxxx— [Insert CIP title]**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Institution \*** | **AY (e.g., 18-19)** | **AY (e.g., 19-20)** | **AY (e.g., 20-21)** | **AY (e.g., 21-22)** | **AY (e.g., 22-23)** |
| Institution A | Insert #  | Insert # | Insert # | Insert # | Insert # |
| Institution B | Insert #  | Insert # | Insert # | Insert # | Insert # |
| Institution C | Insert #  | Insert # | Insert # | Insert # | Insert # |

\*List all [peer institutions](https://www.northcarolina.edu/wp-content/uploads/reports-and-documents/academic-affairs/unc-peer-institution-study_may-2025.pdf) with similar degrees in the same CIP.

1. **Workforce Alignment**

Provide evidence of societal demand and employability of graduates to complete the tables below. North Carolina estimates must include [NC Commerce](https://www.commerce.nc.gov/data-tools-reports/labor-market-data-tools) data. Nationwide estimates are optional but recommended for proposed programs whose graduates have a strong likelihood of employment outside North Carolina. If provided, the data source for Table 4(a) must be the [U.S. Bureau of Labor Statistics](https://www.bls.gov/data/). Include a descriptive sentenceunder each workforce alignment table. Maximum length 500 words.

**Table 4. NC Employment estimates for CIP Code: xx.xxxx with a Matching Education Level Requirement**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Education Level Requirement** |  **2021 workforce demand in NC** | **2030 projected demand**  | **Net Change** | **Percent Change** |
| (e.g. Bachelor's)  | (e.g. 42,402) | (e.g. 49,696) | (e.g. 7,294) | (e.g. 17.20%) |

**Table 4(a). Optional. Nationwide employment estimates for CIP Code: xx.xxxx with a Matching**  **Education Level Requirement**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Education Level Requirement** |  **2021 workforce demand**  | **2030 projected demand**  | **Net Change** | **Percent Change** |
| (e.g. Bachelor's)  | (e.g. 42,402) | (e.g. 49,696) | (e.g. 7,294) | (e.g. 17.20%) |

1. **Education Premium Analysis**

Provide median wage data by level of educational attainment using table format provided below. Discuss the value of the proposed program for a student who graduates with this degree and how skill sets transfer to the job market. *Maximum length 500 words.*

**Table 5. Median Wage for CIP Codes Cross-walked to SOC Code: xx.xxxx - [CIP title here]**

|  |  |  |
| --- | --- | --- |
| **Educational Level Requirement** | **SOC Count** | **Median Wage** |
| Some College or Associate's Degree | 0 | Insert $ amount |
| Bachelor's Degree | 0 | Insert $ amount |

1. **Student Return-on-Investment (ROI) Analysis**

Prepare and discuss ROI per the parameters defined below. *Maximum 500 words.*

* 1. **Cost**
		1. Provide the projected total [tuition and fees](https://www.northcarolina.edu/offices-and-services/finance-and-administration/tuition-and-fees/) for the program based on the anticipated time to degree.
			1. Undergraduate
				1. The program’s tuition and fees, multiplied by the institution’s average undergraduate time to degree.
				2. Institutions may deviate from the average time to degree if a justification is included in the application materials.
			2. Graduate
				1. The institution’s total projected cost for the program, based on approved tuition and fees, multiplied by a reasonable estimate of the time required for a student to complete the program.
	2. **Projected earnings** are at the five-year post-completion mark.
		1. What is the range of earnings at the five-year mark for graduates of similar programs within the UNC System? Data must be collected from [NC Tower](https://tower.nc.gov/) and, when available, [Post-Secondary Educational Outcomes](https://lehd.ces.census.gov/data/pseo_experimental.html) (PSEO) for UNC System comparisons.
		2. What is the range of earnings at the five-year mark for graduates of similar programs at institutions on the institution’s [peer list](https://www.northcarolina.edu/wp-content/uploads/reports-and-documents/academic-affairs/unc-peer-institution-study_may-2025.pdf)? Data must be collected from [North Carolina Star Jobs](https://analytics.nccommerce.com/projections/occ/) and, when available, PSEO for peer institutions comparisons.
1. **Costs, Funding, and Budget**

Adding a new degree program will cost the institution some amount of money and will potentially generate new revenues. Calculating the costs and identifying the funding sources associated with implementation of a new program requires several institutional offices (e.g., academic affairs, finance, institutional research, enrollment management) to collaborate to present an accurate estimate. (*Maximum length 1,200 words)*

1. Complete and attach the *UNC System Academic Program Planning Financial Worksheet* showing all costs required and revenues generated for each of the first five years of the proposed program. Provide a budget narrative for each year addressing the following:
	* 1. **UNC Academic Program Costs**

Faculty costs include all faculty assigned to the proposed program, including faculty serving as program directors, coordinators, department chairs, etc. funded in the 101 instructional budget code. If an existing faculty member is reassigned to the program, the salary is reflected as a reallocated cost. New faculty salaries need to be competitive for the discipline, and figures should include all applicable fringe (e.g., retirement, medical). If the proposed program will hire new faculty, it is a new cost.

Graduate assistant costs are identified either as new or reallocated, as appropriate, and should include all stipends, tuition remission, and benefits, as applicable.

All non-faculty personnel costs, whether EHRA or SHRA, should reflect the full range of non-instructional academic support costs directly associated with running the program, including amounts associated with the Dean’s office, research support, etc. These costs include salaries and all applicable fringe benefits. Positions may encompass non-instructional academic support roles such as those within the Dean’s office, research administration, application processing, program preparation, and general administration of the proposed program. Staffing and equipment purchases should be appropriately scaled to support the stated goals and enrollment targets of the new program. All projected program costs should be reasonable and clearly aligned with the needs identified in the proposal.

* + 1. **UNC System Academic Program Revenues**

Funding sources may include enrollment growth formula funding, other state appropriation, regular tuition, tuition differential, general fees, special fees, reallocation of existing resources, federal funding, and other funding (such as awarded grants or gifts). The total projected revenue from the above categories should allow the proposed program to become self-sufficient within five years.

When estimating funding for new programs, institutions should take into account that students switching programs do not generate additional enrollment growth formula funds. For example, if a program projects enrollment of 20 students, but 12 of them switched into the program from an existing program at the institution, then only 8 of the students would generate additional formula funding.

Reallocation of existing resources includes the salary of faculty reassigned who may be partially or wholly reallocated to the new program. Explain how the current teaching obligations of those faculty are reallocated and include any faculty replacement costs as program costs in the budget. If substantial funds are reallocated, explain how existing undergraduate and graduate programs will be affected.

Federal funding (In-hand only) refers to federal monies from grants or other sources currently in hand. Do not include federal funding sought but not secured. If anticipated federal funding is obtained, at that time it can be substituted for funds designated in other funding categories. Make note within the text of the proposal of any anticipated federal funding. Provide evidence of sustainability after federal funds have been exhausted.

1. Based on the institution’s estimate of available existing resources or expected non-state financial resources that will support the proposed program (e.g., federal support, private sources, tuition revenue, etc.), please describe the following:
	* 1. How does the institution budget and allocate enrollment growth revenues? Is this program expected to generate new enrollment growth for the institution? If so, how will funds be allocated to the proposed program or be used to further other institutional priorities?

* + 1. Will the institution seek other additional state appropriations (both one-time and recurring) to implement and sustain the proposed program? If so, please elaborate.
		2. Will the institution require differential tuition supplements or program-specific fees? If so, please elaborate.
			1. State the amount of tuition differential or program-specific fees that will be requested.
			2. Describe specifically how the campus will spend the revenues generated.
1. Provide a description of how the proposed program can be implemented and sustained If enrollment increase funding, differential tuition, or other state appropriations noted in the budget templates are not forthcoming.
2. If this is an online program offered by an outside provider or Project Kitty Hawk, describe the nature of the relationship, length of contract, funding model (e.g., revenue share, fee for service), and plans for sustainability beyond the initial contract period.
3. **For Research Doctoral Programs Only:**

 Describe the following *(maximum length 1,000 words)*:

1. The research and scholarly infrastructure in place (including faculty) to support the proposed program.
2. Any aspects of financing the proposed program not included in the above section.
3. State the number, amount, and source of proposed graduate student stipends and related tuition benefits that will be required to initiate the program.
4. **For Professional Practice Doctoral Programs Only:**

Describe the following *(maximum length 1,000 words)*:

1. Discussion of external requirements, including professional licensure or accreditation requirements related to the proposed program. If the program is designed or will be marketed to lead to professional licensure, which state(s) has the institution determined the program meets professional licensure requirements for?
2. The academic and professional infrastructure in place (including faculty) to support the proposed program.
3. Any aspects of financing the proposed program not included in the above section.
4. State the number and source of required clinical/practical placements, if applicable. Determine whether it is the students’ or the institution’s responsibility to secure clinical/practical placements and discuss how that expectation will be communicated to students and prospective students. Describe how the institution will ensure that proposed clinical/practical sites are appropriate.
5. **Contact**

List the position titles, names, e-mail addresses and telephone numbers of the persons responsible for planning the proposed program.

|  |  |  |  |
| --- | --- | --- | --- |
| **Position Title** | **Name** | **E-mail Address** | **Telephone** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |

**Signatures**

This Request for Planning Authorization has been reviewed and approved by the appropriate institutional committees and authorities and has my support.

|  |  |  |
| --- | --- | --- |
| **Position Title** | **Signature** | **Date** |
| **Chancellor** |  |  |
| **Provost** |  |  |

***(Only complete below for partner institution if this is a joint degree program proposal)***

|  |  |  |
| --- | --- | --- |
| **Position Title** | **Signature** | **Date** |
| **Chancellor** |  |  |
| **Provost** |  |  |