# New Academic Degree Program Request to Establish

**Institution Name:**

**Degree Program Title (e.g., M.A. in Biology):**

**Reviewed and Approved By**

*Provide Name and title only. No signature required in this section.*

|  |  |  |
| --- | --- | --- |
| **Review** | **Name** | **Title** |
| **Faculty Senate Chair (Or appropriate body)** |  |  |
| **Graduate Council (If applicable)** |  |  |
| **Graduate/Undergraduate Dean (If applicable)** |  |  |
| **Academic College/School Dean** |  |  |
| **Department Head/Chair** |  |  |
| **Program Director/Coordinator** |  |  |

**New Academic Program Process**

New academic programs are initiated and developed by faculty members. The Request to Establish a New Academic Degree Program 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, provost, and chief financial officer, and submit the proposal via the PREP system to the UNC System vice president for academic program, faculty, and research, for review and approval by the UNC System Office. If the Request to Establish is approved by UNC System Office staff, the proposal will be submitted for review and approval by the University of North Carolina Board of Governors.

|  |  |
| --- | --- |
| **Institution Name** |  |
| **Institutional Accreditor**  |  |
| **Joint Degree Program (Yes or No)? If so, list** **partner.** |  |
| **Degree Program Title (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)**)** |  |
| **Requires 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). For online, what % is delivered online? For site-based, what % is delivered at the site?** |  |
| **Will this program be offered by an outside provider such as an Online Program Manager (OPM) or Project Kitty Hawk (PKH)? If yes, list the provider.** |  |
| **If requesting site-based delivery, indicate address(es), city, county, state, and maximum % offered at site.** |  |
| **Does this program require completion of course credits related to diversity, equity, and inclusion, or any other topic identified in** [**UNC Policy Manual**](https://www.northcarolina.edu/apps/policy/index.php#policy-tab) **Section 300.8.5 (VII)?****(Answer: Yes or No)** |  |
| **Proposed Term to Enroll First Students (e.g., Fall 2026)** |  |

Include a copy of the Request for Planning Authorization (RPA) form. Attach the RPA to this document so that the two documents form a single, combined document.

Do the following sections of your previously submitted and approved Request for Planning Authorization to develop a new academic degree program require any changes or updated information? If yes, note the items and, if applicable, provide an explanation.

|  |  |  |
| --- | --- | --- |
| **Category** | **Yes or No** | **Explanation (if applicable)** |
| **Accreditor Liaison Statement** |  |  |
| **Review Status (campus bodies that reviewed and commented on Request for Planning Authorization)** |  |  |
| **Program Summary** |  |  |
| **Student Demand** |  |  |
| **Access and Affordability** |  |  |
| **Societal and Labor Market Demand** |  |  |
| **Doctoral Specific Questions** |  |  |

1. **Program Summary**

*Maximum 250 words per lettered item.*

* 1. Describe the proposed program, including the overall rationale for its development. Include a discussion of how this program supports the specific mission of the institution and of the broader UNC System. Why is this program a necessary addition for the institution?
	2. What are the key objectives of the program? What are the expected benefits for the student who graduates from the program? What are the expected public benefits (at the local, regional, state, or national level) of this program?
1. **Program Planning and Unnecessary Duplication**
	1. List all other public and private four-year institutions of higher education in North Carolina currently operating programs similar to the proposed new degree program, including their mode of delivery (use the 4-digit CIP as a guide). Show a four-year history of applications, acceptances, enrollments, and degrees awarded in similar programs offered at other UNC System institutions (using the format below for each institution with a similar program). If data is not available, mark not available. Programs at UNC System institutions may be found on the UNC System [website](https://www.northcarolina.edu/apps/programs/index.php).

|  |  |
| --- | --- |
| **Institution** |  |
| **Program Title** |  |
| **Academic Year** | Year | Year | Year | Year |
| **Applications** |  |  |  |  |
| **Acceptances** |  |  |  |  |
| **New Enrollment** |  |  |  |  |
| **Total Enrollment** |  |  |  |  |
| **Total Degrees Awarded** |  |  |  |  |

* 1. Describe what was learned in consultation with other programs regarding their experience with student demand and job placement. Indicate how their experiences influenced your enrollment projections.
	2. Identify opportunities for collaboration with institutions offering related degrees and discuss what steps have been or will be taken to actively pursue those opportunities where appropriate and advantageous.
	3. Present documentation that the establishment of this program would not create unnecessary program duplication. In cases where other UNC System institutions provided similar online, site-based distance education, or off-campus programs, directly address how the proposed program meets unmet need.
	4. **Admission.** List the following:
		1. Admissions requirements for proposed programs (indicate minimum requirements and general requirements).
		2. Documents to be submitted for admission
	5. **Degree requirements.** List the following:
		1. Total hours required. State requirements for Major, Minor, General Education, etc.
		2. Other requirements (e.g., residence, comprehensive exams, thesis, dissertation, clinical or field experience, “second major,” etc.).
		3. Completion of course credits related to diversity, equity, and inclusion, or any other topic identified in UNC Policy Manual Section 300.8.5 (VII). **Courses that have diversity, equity, and inclusion elements must be approved by the institution’s chancellor. Include the following information in this document and attach a signed request for the exception.**
			1. If granting an exception for diversity, equity, and inclusion, or any other topic identified, provide a clear outline of the individual or program-specific requirements that are subject to the exception.
			2. Provide a rationale for the exception, demonstrating how the requirement is substantially related to the specific program.
			3. All exceptions must be approved and signed, in writing, by the institution’s chancellor.
				1. Attach the exception to this document so that the two documents form a single, combined document.
	6. **Enrollment.** Estimate the total number of students that would be enrolled in the program during year one, year three, and year five of operation and in each delivery mode (campus, online, site, etc.).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Campus** | **Online** | **Site** | **Full-Time** | **Part-Time** |
| **Year 1** |  |  |  |  |  |
| **Year 3** |  |  |  |  |  |
| **Year 5** |  |  |  |  |  |

* 1. For graduate programs only, please also answer the following:

|  |  |
| --- | --- |
| **Grades required** |  |
| **Amount of transfer credit accepted** |  |
| **Language and/or research requirements** |  |
| **Any time limits for completion** |  |

* 1. For all programs, provide a degree plan showing the sequence of courses to be taken each year. List courses by title and number and indicate those that are required. Include an explanation of the numbering system. Indicate new courses proposed. A possible format is offered below as an example. If your institution uses a different format that provides the required information, it may be submitted instead.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Year 1** | **Course No.** | **Course Title** | **Required (Y/N)** | **New (Y/N)** | **Brief Description (If New Course)** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. **Faculty**
	1. For undergraduate and master’s programs: List the names, ranks and home department of faculty members who will be directly involved in the proposed program. The official roster forms approved by your accreditor may be submitted. For master’s programs, state or attach the criteria that faculty must meet in order to be eligible to teach graduate level courses at your institution.
	2. For doctoral programs: List the names, ranks, and home department of each faculty member who will be directly involved in the proposed program. The official roster forms approved by your accreditor may be submitted. Provide complete information on each faculty member’s education, teaching and research experience, research funding, publications, and experience directing student research including the number of theses and dissertations directed.
	3. Estimate the need for new faculty for the proposed program over the first four years. If the teaching responsibilities for the proposed program will be absorbed in part or in whole by the present faculty, explain how this will be done without weakening existing programs, and how the current teaching responsibilities of those faculty will be covered.
	4. Explain how the program will affect faculty activity, including course load, public service activity, and scholarly research.
2. **Delivery Considerations**

Provide assurances of the following *(not to exceed 250 words per lettered item)*:

1. **Access**(online, site-based distance education, and off-campus programs). Students have access to academic support services comparable to services provided to on-campus students and appropriate to support the program, including admissions, financial aid, academic advising, delivery of course materials, and placement and counseling.
2. **Curriculum delivery**(online and site-based distance education only). The distance education technology to be used is appropriate to the nature and objectives of the program. The content, methods and technology for each online course provide for adequate interaction between instructor and students and among students. What is the impact of online delivery on student access to the program, and what strategies are in place to support students who have internet limitations?
3. **Faculty development**(online and site-based distance education only). Faculty engaged in program delivery receive training appropriate to the distance education technologies and techniques used.
4. **Security** (online and site-based distance education only). The institution authenticates and verifies the identity of students and their work to assure academic honesty/integrity. The institution assures the security of personal/private information of students enrolled in online courses.
5. **Library**
	1. Provide a statement as to the adequacy of present library holdings for the proposed program to support the instructional and research needs of this program (this should be developed in consultation with the university librarian).
	2. If applicable, state how the library will be improved to meet new program requirements for the next four years. The explanation should discuss the need for books, periodicals, reference material, primary source material, etc. What additional library support must be added to areas supporting the proposed program?
	3. Discuss the use of other institutional libraries (outside of your institution) in delivery of the program.
	4. For doctoral programs, provide a systematic needs assessment of the current holdings to meet the needs of the program.
6. **Facilities and Equipment**
	1. Describe the effect of this new program on existing facilities and indicate whether they will be adequate, in year one, five, and ten of the program’s operation.
		1. Will any new square footage be required at any point in the first ten years of the program’s operation? If so, please provide an overview of requirements, timeline, projected costs, and projected funding sources.
		2. Will any existing square footage require repair, renovation, or retrofit? If so, please provide an overview of requirements, timeline, projected costs, and projected funding sources.
	2. Describe the effect of this new program on existing technology, information technology, and services and indicate whether they will be adequate, in year one, five, and ten of the program’s operation.
7. **Administration**
	1. Describe how the proposed program will be administered, giving the responsibilities of each department, division, school, or college. Explain any inter-departmental or inter-unit administrative plans. Include an organizational chart showing the "location" of the proposed new program.
	2. For joint programs only, include documentation that, at minimum, the fundamental elements of the following institutional processes have been agreed to by the partners:
		1. Admission process
		2. Registration and enrollment process for students
		3. Committee process for graduate students
		4. Plan for charging and distributing tuition and fees
		5. Management of transcripts and permanent records
		6. Participation in graduation
		7. Design of diploma
8. **Additional Program Support**
	1. Will additional administrative staff, new master’s program graduate student assistantships, etc. be required that were not previously identified in the Request for Planning Authorization? If so, please describe each item, state the estimated new dollars required at steady state after five years, and state the source of the new funding and resources required.
9. **Accreditation and Licensure**
	1. Where appropriate, describe how all licensure or professional accreditation standards will be met, including required practica, internships, and supervised clinical experiences.
	2. Indicate the names of all accrediting agencies normally concerned with programs similar to the one proposed. Describe plans to request professional accreditation.
	3. If the new degree program meets your accreditor’s definition for a substantive change, what campus actions need to be completed by what date in order to ensure that the substantive change is reported to your accreditor on time?
	4. If recipients of the proposed degree will require licensure to practice, explain how program curricula and title are aligned with requirements to “sit” for the licensure exam. List what state(s) the institution has determined the program meets professional licensure requirements for and how that information will be communicated to students and prospective students.
	5. If this is a proposed joint program, specify the accrediting agency associated with each participating institution. Describe plans for notifying the accrediting agency or agencies about the proposed joint program.
10. **Evaluation Plans**
	1. What student learning outcomes will be met by the proposed program and how will student proficiency be measured? These items may be updated as necessary to meet student and program needs.

|  |  |  |
| --- | --- | --- |
| **Program Student Learning Outcomes** | **Measurement Instrument** | **Criteria for Proficiency (score, percentage, level of performance, etc.)** |
|  |  |  |
|  |  |  |
|  |  |  |

* 1. The plan and schedule to evaluate the proposed new degree program prior to the completion of its fourth year of operation (to include types of measurement, frequency, and scope of program review).
1. **Supporting Fields**
	1. Discuss the number and quality of lower-level and cognate programs in operation at the institution for supporting the proposed degree program.
	2. Are other subject-matter fields at the proposing institution necessary or valuable in support of the proposed program? Is there needed improvement or expansion of these fields? To what extent will such improvement or expansion be necessary for the proposed program?
2. **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.

1. Complete and attach the *UNC System Academic Program Planning Financial Worksheet* showing all costs required, [including approved current tuition and fees](https://www.northcarolina.edu/offices-and-services/finance-and-administration/tuition-and-fees/), and revenues generated for each of the first five years of the 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 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, by 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 institutions’ 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. Differential tuition refers to the difference between the program-specific tuition rate and the university's regular tuition rate. 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.
			3. Describe the anticipated impact of the tuition differential or program-specific fee are expected to impact student access.
1. Provide a description of how the 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. **Additional Information**

Include any additional information deemed pertinent to the review of this new degree program proposal.

1. **Attachments**

Attach *the UNC System Academic Program Planning Worksheet* as the first attachment following this document, the final approved Request for Preliminary Authorization as the second attachment, followed by any other relevant documents.

1. **Signatures**

This proposal to establish a new program has been reviewed and approved by the appropriate campus committees and authorities and has my support.

|  |  |  |
| --- | --- | --- |
| **Position Title** | **Signature** | **Date** |
| **Chancellor** |  |  |
| **Provost** |  |  |
| **Chief Financial Officer** |  |  |

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

|  |  |  |
| --- | --- | --- |
| **Position Title** | **Signature** | **Date** |
| **Chancellor** |  |  |
| **Provost** |  |  |
| **Chief Financial Officer** |  |  |