**MINNESOTA WEST COMMUNITY & TECHNICAL COLLEGE**

## NEW PROGRAM

**\*Remove all instructions that are in red prior to submitting**

|  |  |  |  |
| --- | --- | --- | --- |
| Submitted By: | Click to enter your name | Date: | Click arrow for date picker |
| Campus: | Select your Campus | Phone: | Click to enter phone # |
| Program Name: | Click or tap here to enter text. |
| Division: | Choose a Division. |
| Program Degree: | Choose Program Degree. |
| Program Credit Length: | Click or tap here to enter text. |
| Program CIP Code: | Click or tap here to enter text. |

**Proposed Effective Date:** **(Make sure you take into account the time needed to go thru the MinnState System for approval)** Choose a term.

**Where will the Program be offered: (select all that apply)**

**Canby** [ ]  **Granite Falls** [ ]  **Jackson** [ ]  **Luverne** [ ]  **Pipestone** [ ]  **Worthington** [ ]  **Online** [ ]  **Offsite** [ ]

**Delivery Mode of this Program:**

**Land plus: face-to-face where some online courses may be available or required:** [ ]

**Online Plus: offered entirely online with face-to-face options available for some/all sections:** [ ]

**Online exclusively: must be completed entirely online; no face-to-face options available.** [ ]

**Rationale: Why is this request being made?**

Click or tap here to enter text.

**Program Description:**

Click or tap here to enter text.

**Program Learning Outcomes: (required)**

Click or tap here to enter text.

**Program Curriculum: (enter curriculum by semester)**

**Fall Semester – Year 1**

Click or tap here to enter text.

**Spring Semester – Year 1**

Click or tap here to enter text.

**Fall Semester – Year 2**

Click or tap here to enter text.

**Spring Semester - Year 2**

Click or tap here to enter text.

**Total Credits:** Click or tap here to enter text.

**Explain how this proposal will affect other departments/programs.**

Click or tap here to enter text.

**Admission Requirements:**

Click or tap here to enter text.

**Similar Programs Offered within MinnState:**

Click or tap here to enter text.

Submission Checklist:

Has a letter of intent been filed with MinnState? Yes [ ]  No [ ]

[ ]  Submit a copy of curriculum (course outlines) that will be used in this program.

[ ]  I have submitted a mock-up of the webpage that is needed for this program.

[ ]  I have researched the effect of the proposal on other programs and articulation agreements

**Signatures:**

**Please send to the Academic Affairs Coordinator to route thru DocuSign for signatures**

|  |  |  |
| --- | --- | --- |
| **Personnel** | **Signature** | **Date** |
| Faculty: |  |  |
| Department Head: (if TPT faculty) |  |  |
| Academic Affairs Coordinator: |  |  |
| Academic Dean: |  |  |
| Division Chair: |  |  |
| Advisory Committee: (if applicable)Liberal Arts Transfer Pathway Committee Chair: (If applicable)Provost (only TPT need this step |  |  |
| Academic Affairs & Standards Council Chair: |  |  |

Comments: Click or tap here to enter text.

Revised Date: Click or tap to enter a date.