# LETTER OF INTENT: New Major New Minor When No Major Exists, or New Certificate When No Major Exists



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| OVERVIEW | | | | | | | | | |
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| University | | | Select | | | | | | |
| PASSHE Collaborative Partners | | | Click here to enter text. | | | | | | |
| External Collaborative Partners | | | Click here to enter text. | | | | | | |
| Proposed CIP Code | | Enter 6-Digit CIP Code | | | | | (Please refer to the [CIP code listings from IPEDS](http://nces.ed.gov/ipeds/cipcode/Default.aspx?y=55)) | | |
| Program Type | | Select | | | | | | | |
| Delivery Method | | Select | | | (Refer to the [listing of possible academic program delivery modes](https://secure.passhe.edu/asa/Documents/Academic%20Program%20Delivery%20Modes.pdf)) | | | | |
| Degree/Designation/Award | | **Click here to enter text.** | | | | (Refer to the [Board of Governor’s Policy 1990-06-A: Academic Degrees](http://www.passhe.edu/inside/policies/BOG_Policies/Policy%201990-06-A.pdf)) | | | |
| Department Submitting Proposal | | | | **Click here to enter text.** | | | | | |
| Desired Implementation Date | | | | **Click here to enter a date.** | | | | | |
| Contact Name | **Click here to enter text.** | | | | | | | | |
| Contact Email | **Click here to enter text.** | | | | | | | Contact Phone | **Click here to enter text.** |
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| INTRODUCTION | | | | | | | | | |
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| Please use this area if you would like to include a cover letter. If you are submitting a revised Letter of Intent, use this area to detail any changes you have made to your submission. (Max 5000 characters) | | | | | | | | | |
| Click here to enter text. | | | | | | | | | |
| SUMMARY OF PROPOSED PROGRAM | | | | | | | | | |
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| Please provide a brief summary that includes a program description, scope, and purpose of the program. (Max 1500 characters) | | | | | | | | | |
| Click here to enter text. | | | | | | | | | |
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| APPROPRIATENESS TO MISSION | | | | | | | | | |
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| **Alignment with University Strategic Direction** - Please describe how the proposed program supports the strategic directions of your University. (Max 1500 characters)  Click here to enter text. | | | | | | | | | |
| **Alignment with** [**State System Strategic Initiatives**](http://www.passhe.edu/inside/asa/Documents/PASSHE%20Strategic%20Initiatives%20-%20RMRF.pdf)- Please describe how the proposed program supports the strategic directions of PASSHE. (Max 1500 characters)  Click here to enter text. | | | | | | | | | |
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| PROGRAM NEED | | | | | | | | | |
| Please refer to the [Occupational Supply Demand System](http://www.occsupplydemand.org/) website for more information. | | | | | | | | | |
| **Intellectual Value** - Please discuss the academic / intellectual value of the program (other than market demand). (700 characters)  Click here to enter text. | | | | | | | | | |
| **Student Demand -** Please provide indicators of sustainable student demand. (700 characters)  Click here to enter text. | | | | | | | | | |
| **Regional Market Demand -** Please provide indicators of regional market demand for program completers. (700 characters)  Click here to enter text. | | | | | | | | | |
| **National / International Market Demand (if applicable)** - Please provide indicators of national / international market demand for program completers. (700 characters)  Click here to enter text. | | | | | | | | | |
| **Additional Factors -** Please discuss any additional factors that support program need. (500 characters)  Click here to enter text. | | | | | | | | | |

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| STUDENT LEARNING OUTCOMES AND ASSESSMENT | | |
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| Please present Key Student Learning Outcomes. The full proposal should provide in greater detail the Student Learning Outcomes and Assessment plan. (900 characters)  Click here to enter text. | | |
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| PASSHE ACADEMIC PROGRAM INVENTORY | | |
| Please refer to the [PASSHE Academic Inventory](http://www.passhe.edu/answers/Pages/what.aspx) for a complete listing of programs | | |
| Do other PASSHE universities offer the same or similar programs?  Yes  No | | |
| If YES, please indicate which PASSHE universities offer the same or similar program? | | |
| Bloomsburg  California  Cheyney  Clarion  East Stroudsburg | Edinboro  Indiana  Kutztown  Lock Haven  Mansfield | Millersville  Shippensburg  Slippery Rock  West Chester |
| If you checked any of the universities above, please provide justification as to why your university should offer the proposed program. (700 characters)  Click here to enter text. | | |
| Please describe possible resource sharing, student transfer or articulation, and avoidance of unnecessary duplication. (700 characters)  Click here to enter text. | | |
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| RESOURCE PLANNING | | |
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| Please provide a brief projection of resources necessary to support the program and the sources(s) of funding. (500 characters)  Click here to enter text. | | |
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| ENHANCING DIVERSITY | | |
|  | | |
| Please provide a summary of how this program supports University diversity goals. (500 characters)  Click here to enter text. | | |