

North Dakota University System  
**ACADEMIC AFFAIRS FORMAL REQUEST**  
**STAGE II COVER PAGE**

This form is to accompany each academic request to the System office for State Board of Higher Education or Chancellor action. The purpose of the form is to streamline the request process, promote consistency, and foster improved record-keeping.

**Institution:** \_\_\_\_\_

**I. Action requested:**

- Approval of new program**, Policy 403.1, "Program Approval", SBHE approval
- Approval of new prefix**
- Termination of program**, Policy 403.1.1, "Program Termination", SBHE approval
- Place program on inactive status**, Policy 403.1.3, "Inactive Programs", Chancellor approval
- Program title change**, Policy 403.4, "Changes in Program Titles", Chancellor approval
- Corresponding degree title change**
- Distance education approval**, Policy 404.1, "Distance Learning Credit Activities", Chancellor approval
- Organizational change**, Policy 307.1, "Institutional Organization-Notice and Approval", SBHE approval
- Other**, Policy \_\_\_\_\_, " \_\_\_\_\_", \_\_\_\_\_ approval

**II. Program information** (where applicable):

**NDUS Academic Program** (this is an abbreviation of the Description; example UGBIO) \_\_\_\_\_

**Program Title** \_\_\_\_\_

**Old title (if title change)** \_\_\_\_\_

- Major
- Minor
- 2<sup>nd</sup> Major**

**Short Description; (10 characters title)** \_\_\_\_\_

**Program Prefix Requested** \_\_\_\_\_

**First Valid Term** \_\_\_\_\_

**Academic Career** (UG, G, L, M) \_\_\_\_\_

**Grading Scheme** (UG, G, L, M) \_\_\_\_\_

**Academic Group; (division, college, school)** \_\_\_\_\_

**CIP Code** \_\_\_\_\_

**Degree/award:**

- |                                                                     |                                  |                                                                |
|---------------------------------------------------------------------|----------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Certificate Program                        | <input type="checkbox"/> Diploma | <input type="checkbox"/> Associate in Applied Science (A.A.S.) |
| <input type="checkbox"/> Associate in Arts (A.A.)                   |                                  | <input type="checkbox"/> Associate in Science (A.S.)           |
| <input type="checkbox"/> Bachelor of Science (B.S.)                 |                                  | <input type="checkbox"/> Bachelor of Arts (B.A.)               |
| <input type="checkbox"/> Bachelor of Science in Education (B.S.Ed.) |                                  | <input type="checkbox"/> Master of Arts (M.A.)                 |
| <input type="checkbox"/> Master of Science (M.S.)                   |                                  | <input type="checkbox"/> Doctor of Philosophy (Ph.D.)          |
| <input type="checkbox"/> Doctorate in Education (Ed.D.)             |                                  | <input type="checkbox"/> _____                                 |
- Authorized to Offer Degree

**III. Submitted by:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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For System office use only:

Office \_\_\_/\_\_\_/\_\_\_ AAC \_\_\_/\_\_\_/\_\_\_

Cabinet \_\_\_/\_\_\_/\_\_\_

Chancellor \_\_\_/\_\_\_/\_\_\_

Board \_\_\_/\_\_\_/\_\_\_ HECN \_\_\_/\_\_\_/\_\_\_

CIP code \_\_\_\_\_

Major code \_\_\_\_\_