

## **Cover Sheet**

Open/Close a Program 2024-2025 Academic Year

This document must be completed and submitted to <a href="mailto:AcademicAffairs@du.edu">AcademicAffairs@du.edu</a>, after receiving dean-level approval, for any curricular changes requiring voting from Graduate and/or Undergraduate Council in addition to the completed CourseLeaf form.

Date:		Effective Term:
Creder	ntial Name:	
College	e:	Department:
Gradu	oto 🗆 Undor	rodusto $\square$
	ate Underg	
Summ	n <b>ary</b> (provide a	narrative overview of proposal or change)
	nale (provide a gic objectives)	summary of reason for proposal or change and how it fits with

<b>ogram Require</b> y that need to b	ments (list course: e developed).	s within the cre	dential indicati	ng existing cour	ses and
ogram or supp	sources (outline factors outlined change be mode of deliver cation).	es including fac	culty, facilities, t	echnology, libra	ry and othe

Relationship to Other Programs (identify competing programs within the University, and how the characteristics of the new program are distinctive. Address how the new program will affect enrollment in existing programs and offering of current courses as applicable. If the program includes courses from other department, approval from other department	
chair for includes courses. If college/school/or this program is accredited, provide documentation that this change will not affect this accreditation or that you have gained approval from that body to proceed with these changes.)	
Market Feasibility (Include a list of similar competitor programs external to DU, regionally and nationally. What will full enrollment look like in this program? How many years do you expect it to take to reach full enrollment?)	
Assessment (General statement on student learning outcomes)	