



Community College Curriculum Change Form

The following form can be used for any community college curriculum change, this includes: degrees, majors, minors, concentrations and certificate.

AREA 1: Submission Information

College: _____

Department: _____

Degree: _____

Proposed Effective Term: _____

Person completing this application: _____

Title: _____

Phone: _____

Email: _____

Date Submission Started: _____

AREA 2: Checklist for Approvals

- | | |
|--|---|
| <input type="checkbox"/> Departmental Faculty | <input type="checkbox"/> CC System Academic Council |
| <input type="checkbox"/> Department Head | <input type="checkbox"/> NM Higher Ed. Dept. (NMHED)** |
| <input type="checkbox"/> College Curriculum Committee* | <input type="checkbox"/> Higher Learning Commission (HLC)** |
| <input type="checkbox"/> Academic Dean | <input type="checkbox"/> Send to Registrar's Office (coding) |
| <input type="checkbox"/> CC Academic VP | |

*All programs except Certificates.

**If needed

AREA 3: General Questions

1. Academic program(s):

- | | |
|---|--|
| <input type="checkbox"/> Associate's Degree | <input type="checkbox"/> Associate's Major |
| <input type="checkbox"/> Applied Associate's Degree | <input type="checkbox"/> Certificate |

2. Type(s) of changes:

- | | |
|---|--|
| <input type="checkbox"/> Title Change | <input type="checkbox"/> Inactivation/Deletion |
| <input type="checkbox"/> Credit Hour Change | |



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Contact Information
debgiron@nmsu.edu
krkeyes@nmsu.edu

REQUIRED ATTACHMENTS

- A. Catalog Description (add at the end of the form)
 - o Attach the existing catalog entry (description and content) from the most recent catalog
 - o Attach a *separate* copy with the *proposed changes in Red-Lined format*. Changes should include
 - New Name of the Program (if applicable)
 - Changed Credit Hour Total
 - Specific information about the change in credits (dropping/adding electives, removing/adding core courses, removing/adding prerequisites, etc.)

- B. Bachelor Degree program applications
 - o Changes in Meta-Major(s) alignment-

3. **Approvals.** Do any of the approvals identified below apply to your college, department or program? (Yes or No.) If Yes, explain the situation
- a. Is your proposed change closely related to another program from another department/college?

 - b. If yes to the above question, has the department already gotten the approval from those department(s)/college(s) prior to the submission of this program addition?

Departmental (faculty): Yes No N/A Signature: _____

College/Division: Yes No N/A Signature: _____

Las Cruces Dept/College: Yes No N/A Signature: _____



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AREA 5: Approval Signatures (in sequential order)

Departmental Faculty:	Date:
Department Head:	Date:
College Curriculum Committee (all except certificates):	Date:
Academic Dean:	Date:
CC Academic VP:	Date:
CC System Academic Council:	Date:
NM Higher Education Department:	Date:
Higher Learning Commission:	Date:

AREA 6: Internal Processing: (REGISTRAR'S OFFICE PROCESSING ONLY)

AREAS	BANNER CODING (OLD)	BANNER CODING (NEW)	DESCRIPTION
Campus			
College			
Level			
Banner Program			
Degree			
Major			
CIP Code			
Financial Aid			
Banner Rule #			
Term			
Credit Hours			
Note			