

This template is to be used for proposed name changes included on the Academic Plan and for which the unit has received specific written approval from the Provost's office to proceed with internal proposal development and review. A separate proposal must be submitted for each individual name change. The proposal template should be completed and submitted by the Dean's Office to the University Provost's Office [[mailto: curriculumplanning@asu.edu](mailto:curriculumplanning@asu.edu)]. The name change **may not** be implemented until the Provost's Office notifies the academic unit that the name change proposal has completed the approval process.

**College/School/Institute:** New College of Interdisciplinary Arts and Sciences

**Department/Division/School:** School of Humanities, Arts and Cultural Studies

**Proposing Faculty Group (if applicable):** Faculty within Integrative Studies program and Religion and Applied Ethics program.

**Program type:** Undergraduate Degree

**Name of existing program:** Religion and Applied Ethics Studies, BA

**Proposed new name:** Philosophy, Religion and Society, BA

**Proposal Contact**

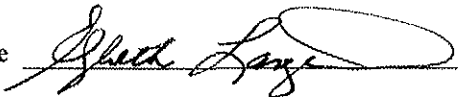
**Name:** Marlene Tromp **Title:** Director

**Phone number:** (602)543-6242 **Email:** marlene.tromp@asu.edu

**DEAN APPROVAL(S)**

This proposal has been approved by all necessary unit and College/School levels of review. I recommend implementation of the proposed name change.

**College/School/Division Dean name:** Dr. Elizabeth Langland

**Signature**  **Date:** 1/18/2013

**College/School/Division Dean name:**  
(if more than one college involved)

**Signature** **Date:** / /20

*Note: An electronic signature, an email from the dean or dean's designee, or a PDF of the signed signature page is acceptable.*

**Name of existing program:** Religion and Applied Ethics Studies, BA

**Proposed new name:** Philosophy, Religion and Society, BA

**Program type:** Undergraduate Degree

If graduate/undergraduate degree or concentration is selected, indicate degree type and major (e.g., BA, MBA, PhD)  
BA

**Plan code(s) for the program:**

If this is a degree program that has multiple concentrations, list all plan codes impacted.  
ASRELBA

**Requested effective date:** 20 14-15

Select the catalog year for which students can begin applying into this program with the new name.

Note:

1. Name changes can only be implemented so as to be effective for a fall semester.
2. All existing and continuing students will be moved to the new name.
3. Students who complete the degree requirements prior to the fall effective date graduate under the old name.

**Briefly describe the proposed change and rationale for the change:**

The name change will clarify the program's content and make the areas covered in the degree more visible and understandable to students.

**Discuss the impact of this change on current students and/or enrollment:**

There should be only positive benefits for our students - for grad school and job applications.