#### MEMORANDUM

TO: Undergraduate Committee

FROM: Brennan Forss Director, W. P. Carey Academy

DATE: September 29, 2010

**RE:** Business Honors Certificate

This is a formal request to change the name of the Business Honors certificate. The official name of the certificate currently is Certificate in Honors Business Modeling and Analysis. To more accurately reflect the purpose of the certificate and its alignment with Consulting Scholars, I would like the name to be changed to Certificate in Honors Business Consulting.

The certificate's curriculum requires students to participate in Consulting Scholars and complete three courses related to consulting – WPC 494: Consulting in Business, WPC 494: Modeling Tools in Consulting, and WPC 494: Consulting Projects or WPC 493: Honors Thesis/Creative Projects.

There are currently 8 students who have submitted paperwork to pursue this certificate.

Approved by the Faculty Council, W. P. Carey School on November 3, 2010

Approved:

11/3/2010

Amy Hillman, Executive Dean W. P. Carey School of Business



# ARIZONA STATE UNIVERSITY PROPOSAL TO CHANGE THE NAME OF AN ACADEMIC PROGRAM (Degree, concentration, certificate, minor)

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.

## **PROGRAM INFORMATION**

Name of existing program: Certificate in Honors Business Modeling and Analysis

Proposed name change to: Certificate in Honors Business Consulting

PROPOSAL CONTACT INFORMATION (Person to contact regarding this proposal)

Title: Director, W. P. Carey Academy

Phone: (480)965-0295

Name: Brennan Forss

email: Brennan.Forss@asu.edu

#### **DEAN APPROVAL**

This proposal has been approved by all necessary unit and College/School levels of review. I recommend implementation of the proposed name change. (*Note: An electronic signature, an email from the dean or dean's designee, or a PDF of the signed signature page is acceptable.*)

College/School Dean name: Amy Hillman College/School Dean signature <u>Amy</u> Hill uch	Date: 11 10 10
College/School Dean name:	
College/School Dean signature (if more than one college/school involved)	Date:
College/School Dean name:	

College/School Dean signature \_\_\_\_\_ Date: \_\_\_\_\_ Date: \_\_\_\_\_

### ARIZONA STATE UNIVERSITY PROPOSAL TO CHANGE THE NAME OF AN ACADEMIC PROGRAM (Degree, concentration, certificate, minor)

This proposal template should be completed in full and submitted to the University Provost's Academic Council [mailto:curriculumplanning@asu.edu]. It must undergo all internal university review and approval steps including those at the unit, college/school, and university levels. The name change **may not** be implemented until the Provost's Office notifies the academic unit that the proposal has completed the approval process.

### **PROGRAM INFORMATION**

College/School: W. P. Carey School of Business

Division/School and/or Department: W. P. Carey Academy

If this is a program (i.e. offered by more than one department or college) list all the additional units and college/schools that offer the program. Note: All units offering this program must have collaborated in the proposal development and completed the appropriate unit and college/school approvals. N/A

Name of existing program: Certificate in Honors Business Modeling and Analysis

Proposed name change to: Certificate in Honors Business Consulting

**Plan code(s)** for the program (If a degree program is being disestablished that has multiple concentrations, list all plan codes impacted): BAECNUERT

Projected effective term: Fall and year: 2011

#### Check type of program to which the name change will apply:

<b>Program Type</b> (Please mark one; submit a separate form for each program requesting the change)	<b>Degree Type</b> (Please mark one; submit a separate form for each program requesting the change)	
Degree/major	Undergraduate	Graduate
Please indicate all degrees impacted (e.g., BA, BA/BS, PhD):		
Concentration for an existing degree program Please indicate degree/major:	Undergraduate	Graduate
Minor		
Certificate program	🛛 Undergraduate	Graduate

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

The name change is to more accurately reflect the purpose of the certificate and its alignment with Consulting Scholars.

Impact on current students: N/A

Cover Sheet with Dean's Approval must be accompanied with this form.