



**ARIZONA STATE UNIVERSITY
PROPOSAL TO DISESTABLISH AN ACADEMIC PROGRAM
(Degree, concentration, minor or certificate)**

This proposal template should be completed and submitted to the University Provost's Academic Council [[mailto: curriculumplanning@asu.edu](mailto:curriculumplanning@asu.edu)]. The disestablishment **may not** be implemented until the Provost's Office notifies the academic unit that the disestablishment proposal has completed the approval process.

PROGRAM INFORMATION

Name of program to be disestablished: Electrical Engineering concentration under the PhD in Engineering Science

PROPOSAL CONTACT INFORMATION

(Person to contact regarding this proposal)

Name: Joseph Palais

Title: Graduate Program Chair/Professor

Phone: 480-965-3757

email: joseph.palais@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 program disestablishment. *(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: Paul C. Johnson

College/School Dean signature  _____ **Date:** 4/11/11

Executive Vice Provost for Academic Affairs and Graduate College Dean Name: Maria T. Allison **Date:** 4/12/2011

Executive Vice Provost for Academic Affairs and Graduate College Dean Signature:  _____ **Date:** 4/12/2011



**ARIZONA STATE UNIVERSITY
PROPOSAL TO DISESTABLISH AN ACADEMIC PROGRAM
(Degree, concentration, minor or certificate)**

Name of program to be disestablished: Concentration in Electrical Engineering under the PhD in Engineering Science

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

Projected effective term: Fall Select term and year: 2011

Check type of program to be disestablished:

Program Type (Please mark one; submit a separate form for each program to be disestablished)	Degree Type (Please mark one; submit a separate form for each program to be disestablished)	
<input type="checkbox"/> Degree/major Please indicate degree type (e.g., BA, BA/BS, PhD):	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate
<input checked="" type="checkbox"/> Concentration for an existing degree program Please indicate degree/major: PhD Engineering Science - Electrical Engineering concentration	<input type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Graduate
<input type="checkbox"/> Minor		
<input type="checkbox"/> Certificate program	<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate

Briefly describe the rationale for disestablishment:

No students enrolled

Impact on other existing programs: Could include availability of course content for students in other majors who may need it; other.

No impact on other programs.

Impact on current students: Estimate number of students still enrolled; anticipated date of last graduates; arrangements for continuing students and students in articulated transfer pathways (ex. MAPP, TAG).

None enrolled. No students enrolled for several years.

Additional information: Provide any relevant information not required above that will assist in evaluating the proposal.