



CHANGES TO EXISTING GRADUATE ACADEMIC PROGRAMS
ARIZONA STATE UNIVERSITY
GRADUATE COLLEGE

This form should be used when a unit is proposing a change to an already-approved academic program. These changes might include changes to the minimum required hours for a degree, a change to the culminating experience option(s) available to students in a program, a change in delivery format for a degree program, or the establishment of a dual or concurrent degree program.

Submit the completed and signed (chairs, unit deans) proposal to the **Office of Graduate Academic Programs**. Mail code 1003 and electronic copies to ozel@asu.edu or Denise.Campbell@asu.edu

Please type. All applicable fields should be completed. Additional supplemental material, if required, may be submitted with this form.

CONTACT NAME Dale Palmgren	CONTACT PHONE (480) 727-1917
COLLEGE College of Technology and Innovation	DEPARTMENT (not applicable)
DEGREE/ MAJOR Master of Science in Technology (1 - Computer Systems Concentration) and (2 - Computing Systems Concentration)	
PLAN CODE 1 – TSCPMSTECH and 2 – TSCOMSTECH	

Proposed Change

Current Requirement(s). Please provide a detailed description of the current program requirement(s) only as it pertains to the requested change(s).

The two concentrations listed above are currently active under the Master of Science in Technology degree program.

Requested Change(s). Please provide a detailed description of the change(s) to the requirement listed above and include a justification for the requested change(s).

We propose to disestablish the concentrations in:

1. Computer Systems
2. Computing Systems

We are requesting the disestablishment of concentrations 1 and 2 because we will utilize the Computing Studies major under the Master of Computing Studies degree program in lieu of these concentrations and otherwise, will operate without any other changes.

Impact Assessment

Please respond to each point below.

How will the proposed change impact the existing program (e.g., student enrollment, effective resource use, time-to-degree, target audience, faculty workload, etc.)?

The current students in the Computer Systems and Computing Systems concentrations will be moved to the Master of Computing Studies degree program with no loss to their degree progress.

How will the proposed change impact other programs at ASU?

Yes No Is collaboration with an entity (institution or university) outside of ASU required for this proposed change?
If yes, please elaborate further regarding the nature of this collaboration and outline if there is an institutional agreement already in place between ASU and the outside entity.

Yes No Are additional resources needed for the proposed change (e.g., classroom and laboratory space, financial or technical support, faculty, staff and library holdings)? If yes, please describe below.

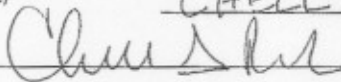
Yes No Are additional courses needed for the proposed change? If yes, please list below all required new courses and indicate if they have been submitted to the ACRES online system for approval.

Approvals (if the proposal submission involves multiple units, please include letters of support from those units)

DEPARTMENT CHAIR
(Please print or type)

CHILL ROBERTS

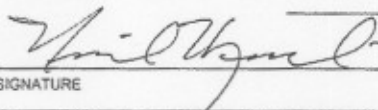
SIGNATURE



4-21-09
DATE

DEAN (Please print or type)

SIGNATURE



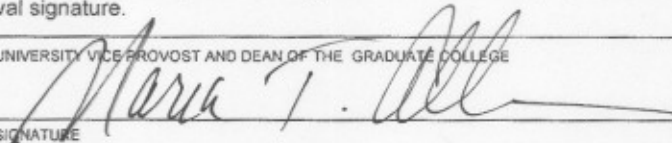
4/20/09
DATE

The Office of Graduate Academic Programs will submit the proposal to the Vice Provost and Dean of Graduate Studies for the final approval signature.

GF0808D-90

UNIVERSITY VICE PROVOST AND DEAN OF THE GRADUATE COLLEGE

SIGNATURE



8/5/09
DATE