



**ARIZONA STATE UNIVERSITY
PROPOSAL TO CHANGE THE NAME OF AN ACADEMIC PROGRAM**

This proposal template should be completed in full and submitted to the University Provost's Academic Council [<mailto:curriculum@asu.edu>]. It must undergo all internal university review and approval steps including those at the unit, college/school, and university levels.

A proposed academic program name change that was not included on the approved Academic Plan must also be approved by the Executive Director of ABOR. The program name change **may not** be implemented until the Provost's Office notifies the academic unit that the name change has completed the approval.

PROGRAM INFORMATION

Name of existing program: Master of Arts (M.A.) in Applied Ethics and the Professions – **Medical Ethics**

Proposed name change to: Master of Arts (M.A.) in Applied Ethics and the Professions – **Biomedical and Health Ethics**

PROPOSAL CONTACT INFORMATION

(Person to contact regarding this proposal)

Name: Kelly O'Brien

Title: Lincoln Center Programs Director


Phone: 480-727-7691

email: KellyOBrien@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: College of Liberal Arts and Sciences/ VP and Dean, Quentin Wheeler

College/School Dean signature  **Date:** 10/6/2009
Deborah Losse, Dean of Humanities

College/School Dean name:

College/School Dean signature Not Applicable **Date:** _____
(If more than one college/school involved)

Graduate College Approval: Maria T. Allison

University Vice-Provost and Dean Signature  **Date:** 10/19/09
(if more than one college/school involved)



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PROGRAM INFORMATION

College/School: School of Letters and Sciences, Quentin Wheeler/CLAS

Division/School and/or Department:

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

Name of existing program: Master of Arts in Applied Ethics and the Professions -- **Medical Ethics**

Proposed name change to: Master of Arts in Applied Ethics and the Professions – **Biomedical and Health Ethics**

Projected effective term: Select term and year: **Fall 2009**. (Immediate. Enrolled & prospective students have all been advised of this change being requested to more accurately reflect content & coursework).

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

Program Type (Please mark one; submit a separate form for each program requesting the change)	Degree Type (Please mark one; submit a separate form for each program requesting the change)	
<input type="checkbox"/> Degree/major Please indicate all degrees impacted (e.g., BA, BA/BS, PhD):	<input type="checkbox"/> Undergraduate	Graduate
<input checked="" type="checkbox"/> Concentration for an existing degree program Please indicate degree/major: Master of Arts in Applied Ethics and the Professions	<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 proposed change and rationale for the change:

This change will better reflect the content of this concentration coordinated by Lincoln Professor Jason Robert. The change in the title of the concentration captures the fact that many of the elective courses in that concentration are in the Health Ethics area and should attract practitioners and some students in the medical school (where Professor Robert teaches) to this concentration in the MA degree.

This change does not involve any substantial content changes, though this retitling will allow us to include some additional elective courses in that concentration that should make it more attractive to students in the health care and health care administration fields.

Impact on current students: In general, all students with a "catalog year" for the program prior to the effective date will maintain the current name of the program regardless of when they complete the requirements. If a current student wants to have the new title for their program, they may change their catalog year/program code to align with the date of the title change.

Note: All current students and prospective students have been advised that this change in the title of the concentration is being requested. If approved, please implement/activate changes for the current semester.