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: Undergraduate Certificate in Multimedia Writing and Technical Communication

Proposed name change to: Undergraduate Certificate in Technical Communication

PROPOSAL CONTACT INFORMATION
(Person to contact regarding this proposal)

Name: Barry Maid
Title: Professor
Phone: 7-1190
email: Barry.Maid@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: Craig D. Thatcher
College/School Dean signature

Date: 1/23/09

College/School Dean name:

College/School Dean signature

Date:
(if more than one college/school involved)

College/School Dean name:

College/School Dean signature

Date:
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PROGRAM INFORMATION

College/School: School of Applied Arts and Sciences

Division/School and/or Department: Multimedia Writing and Technical Communication

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. n/a

Name of existing program: Undergraduate Certificate in Multimedia Writing and Technical Communication

Proposed name change to: Undergraduate Certificate in Technical Communication

Projected effective term: Fall 2009

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

<table>
<thead>
<tr>
<th>Program Type</th>
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<tbody>
<tr>
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<td>(Please mark one; submit a separate form for each program requesting the change)</td>
</tr>
<tr>
<td>☐ Degree/major Please indicate all degrees impacted (e.g., BA, BA/BS, PhD): BIS</td>
<td>☐ Undergraduate ☐ Graduate</td>
</tr>
<tr>
<td>☐ Concentration for an existing degree program Please indicate degree/major:</td>
<td>☐ Undergraduate ☐ Graduate</td>
</tr>
<tr>
<td>☐ Minor</td>
<td>☒ Undergraduate ☐ Graduate</td>
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<tr>
<td>☒ Certificate program</td>
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Briefly describe the proposed change and rationale for the change:
To align the names with the new proposed MS degree in Technical Communication

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.

Cover Sheet with Dean’s Approval must be accompanied with this form.
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PROGRAM INFORMATION

Name of existing program: BAS Applied Science (Multimedia Writing and Technical Communication)

Proposed name change to: BAS Applied Science (Technical Communication)

PROPOSAL CONTACT INFORMATION
(Person to contact regarding this proposal)

Name: Barry Maid

Title: Professor

Phone: 7-1190
e-mail: Barry.Maid@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: Craig D. Thatcher

College/School Dean signature: [Signature]

Date: 11/25/09

College/School Dean name:

College/School Dean signature: [Signature]

Date: [Blank]

College/School Dean name:

College/School Dean signature: [Signature]

Date: [Blank]

Program Name Change Approval Form

COVER SHEET
ARIZONA STATE UNIVERSITY
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PROGRAM INFORMATION

College/School: School of Applied Arts and Sciences

Division/School and/or Department: Multimedia Writing and Technical Communication

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.

n/a

Name of existing program: BAS Applied Science (Multimedia Writing and Technical Communication)

Proposed name change to: BAS Applied Science (Technical Communication)

Projected effective term: Fall 2009

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

<table>
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<tr>
<td>Please indicate all degrees impacted (e.g., BA, BA/BS, PhD):</td>
<td>☐ Graduate</td>
</tr>
<tr>
<td>☑ Concentration for an existing degree program</td>
<td>☑ Undergraduate</td>
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<tr>
<td>Please indicate degree/major: BAS in Applied Science</td>
<td>☐ Graduate</td>
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<tr>
<td>☐ Minor</td>
<td></td>
</tr>
<tr>
<td>☐ Certificate program</td>
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<td></td>
<td>☐ Graduate</td>
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Briefly describe the proposed change and rationale for the change:
To align the names with the new proposed MS degree in Technical Communication

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.

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PROGRAM INFORMATION

Name of existing program: BIS Interdisciplinary Studies (Multimedia Writing and Technical Communication)
Proposed name change to: BIS Interdisciplinary Studies (Technical Communication)

PROPOSAL CONTACT INFORMATION
(Person to contact regarding this proposal)

Name: Barry Maid
Phone: 7-1190
email: Barry.Maid@asu.edu
Title: Professor

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: Craig D. Thatcher
College/School Dean signature: ____________________________ Date: 1/25/09

College/School Dean name: ____________________________ Date: __________
(If more than one college/school involved)

College/School Dean name: ____________________________ Date: __________
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PROGRAM INFORMATION

College/School: School of Applied Arts and Sciences

Division/School and/or Department: Multimedia Writing and Technical Communication

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: BIS Interdisciplinary Studies (Multimedia Writing and Technical Communication)

Proposed name change to: BIS Interdisciplinary Studies (Technical Communication)

Projected effective term: Fall 2009

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

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</tr>
<tr>
<td>□ Concentration for an existing degree program</td>
<td>□ Undergraduate</td>
</tr>
<tr>
<td>Please indicate degree/major: BIS Interdisciplinary Studies</td>
<td>□ Graduate</td>
</tr>
<tr>
<td>□ Minor</td>
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Briefly describe the proposed change and rationale for the change:
To align the names with the new proposed MS degree in Technical Communication.

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.

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PROGRAM INFORMATION

Name of existing program: B. S. Multimedia Writing and Technical Communication

Proposed name change to: B. S. Technical Communication

PROPOSAL CONTACT INFORMATION

(Person to contact regarding this proposal)

Name: Barry Maid
Title: Professor

Phone: 7-1190
email: Barry.Maid@asu.edu

DEAN APPROVAL

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College/School Dean name: Craig D. Thatcher
College/School Dean signature: [Signature]
Date: 1/25/09

College/School Dean name:
College/School Dean signature: [Signature]
Date: __________
(if more than one college/school involved)

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PROGRAM INFORMATION

College/School: School of Applied Arts and Sciences

Division/School and/or Department: Multimedia Writing and Technical Communication

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.

n/a

Name of existing program: B. S. Multimedia Writing and Technical Communication

Proposed name change to: B. S. Technical Communication

Projected effective term: Fall 2009

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

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<td>☐ Graduate</td>
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Briefly describe the proposed change and rationale for the change:
To align the names with the new proposed MS degree in Technical Communication.

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.

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PROGRAM INFORMATION

Name of existing program: Post-Baccalaureate Certificate in Multimedia Writing and Technical Communication

Proposed name change to: Post-Baccalaureate Certificate in Technical Communication

PROPOSAL CONTACT INFORMATION
(Person to contact regarding this proposal)

Name: Barry Maid
Title: Professor

Phone: 7-1190
email: Barry.Maid@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: Craig D. Thatcher
College/School Dean signature: [Signature]
Date: 12/15/2009

College/School Dean name:
College/School Dean signature: __________________________ Date: __________
(if more than one college/school involved)

College/School Dean name: 
College/School Dean signature: __________________________ Date: __________
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PROGRAM INFORMATION

College/School: School of Applied Arts and Sciences

Division/School and/or Department: Multimedia Writing and Technical Communication

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n/a

Name of existing program: Post-Baccalaureate Certificate in Multimedia Writing and Technical Communication

Proposed name change to: Post-Baccalaureate Certificate in Technical Communication

Projected effective term: Fall 2009

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

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