

This template is to be used to propose moving an academic program to another academic organization, or within its current academic organization. A separate proposal must be submitted for each individual academic program in order to change its academic organization. Proposals to move degree programs from one college/school to another must be pre-approved on the annual Academic Plan submitted to ABOR. Proposals to move academic programs within an existing college/school do not require pre-approval on the Academic Plan.

### PROGRAM INFORMATION

**College/School/Institute:**  
College of Liberal Arts and Sciences

**Unit(s) within college/school responsible for Academic program (Academic ORG):**

**Requested effective term: Fall and year: 2017**

**Plan Description:** Southeast Asian Studies  
**Degree/Program Offered:** Certificate  
**Plan Code:** LASALCERT  
**CIP Code:** N/A

**Current Information:**  
**Organization Code:** CLADN  
**Description:** Dean, Liberal Arts/Sciences  
**Contact:** Jenny Smith  
**Email/Phone:** Jenny.Smith@asu.edu/965-1355

**Proposed Information**  
**Organization Code:** CHSTCRIT  
**Description:** School of Historical, Philosophical & Religious Studies  
**Contact:** Manisha Master  
**Email/Phone:** Manisha.Master@asu.edu/480-965-8364

### Rationale for the proposed change:

This certificate is managed and the advising is done by the School of Historical, Philosophical and Religious Studies.

### PROPOSAL CONTACT

**Name:** Paul LePore **Title:** Associate Dean  
**Phone Number:** 480-965-6506 **Email:** Paul.LePore@asu.edu

### DEAN APPROVAL(S)

This proposal has been approved by all necessary unit and College/School levels of review. I recommend implementation of the proposed organizational change.

**College/School/Division Dean name:** Paul LePore

**Signature** 

**Date:** 2/8/2017

**College/School/Division Dean name:**  
(if more than one college involved)

**Signature**

**Date:** / /20

*Note: An electronic signature, an email from the dean or dean's designee, or a PDF of the signed signature page is acceptable.*

Approved by the Graduate College  
(If applicable)

Date: \_\_\_\_\_

Signature – Executive Vice President and Provost of the University  
(final approval)

Date: \_\_\_\_\_

Processed by- University Registrar's Office

Date: \_\_\_\_\_