

PROPOSAL TO DISESTABLISH AN ACADEMIC PROGRAM (Degree, concentration, certificate, minor)

This template is to be used for proposed disestablishments included on the Academic Plan and for which the unit has received specific written approval from the Office of the University Provost to proceed with internal proposal development and review. This proposal template should be completed and submitted by the Dean's Office to the Office of the University Provost [mailto: curriculumplanning@asu.edu]. The disestablishment <u>may not</u> be implemented until the Office of the University Provost notifies the academic unit that the disestablishment proposal has completed the approval process.

UNIT AND PROGRAM INFORMATION						
College/School/Institute:		Mary Lou Fulton Teachers College				
Department/Division/School:		Division of Teacher Preparation (CELEMED)				
Proposing Faculty Group (<i>if applicable</i>):						
Proposal Contact						
Name:	Ida Malian		Title:	Interim Division Director		
Phone number:	602-543-6043		Email:	Ida.Malian@asu.edu		
Existing Program Information						
Program Type:	Certificate		Academi	c Level:	Undergraduate	
Degree Type:	Certificate If other sp	pecify				
Name:	Games and Impact		Concer	ntration (if applicable)	()	
Plan code(s) for the program:						

If this is a degree program that has multiple concentrations, list all program names and plan codes impacted. **TEGIMCERT**

Implementation information: Degree Search is our official record of the academic catalog. Therefore, all academic programs which are active and have students enrolled are required to be listed on Degree Search. Upon request by the Dean's Office, an academic program can be removed from the undergraduate or graduate application; however, the program will remain in degree search with the notation "This program is no longer accepting applications," until the approved effective date of the disestablishment.

Requested effective date: 2018-19

Briefly describe the rationale for disestablishment:

We would like to disestablish this certificate due to low enrollment.

Impact on other existing programs:

May include availability of course content for students in other majors who may need it; other. Students in this certificate will be able to complete the coursework as prescribed.



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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 (e.g., MAPP, TAG).

We will close applications for the 2018-19 application cycle. Current students will be able to complete their certificate program as designed.

Applications:

What term should applications close? If this change should be made immediately upon approval, please indicate this. Please note that the program will remain on Degree Search until such a time that no students remain enrolled in the program. Immediately.

Current applicants:

Describe actions that will be taken regarding admitted students or students who have applied to this program? If current applicants should be moved to a new program, please indicate the plan code of that program.

Admitted students will be able to complete the program as prescribed.

Additional information:

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

DEAN APPROVAL(S)							
This proposal has been approved by all necessary unit and College/School levels of review. I recommend implementation of the proposed name change.							
the proposed name change.							
College/School/Division Dean name:	Ida Malia						
Signature	AMA	Date: <u>3 /27 /2017</u>					
College/School/Division Dean name: (<i>if more than one college</i> <i>involved</i>)	Carole Ba	sile					
Signature	Carole/	J. Basile Date: 3 /27 /20 17					
Note: An electronic signature, an email from the dean or dean's designee, or a PDF of the signed signature page is acceptable.							
University Approval(s)							
Vice Provost for Graduate							
S	Signature:	Date: / /20					
Vice Provost for Undergraduate							
S	Signature:	Date: / /20					