This template is to be used for proposed name changes 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. A separate proposal must be submitted for each individual name change. The proposal template should be completed and submitted by the Dean’s Office to the Office of the University Provost [mailto: curriculumplanning@asu.edu]. The name change may not be implemented until the Office of the University Provost notifies the academic unit that the name change proposal has completed the approval process.

College/School/Institute: Ira A. Fulton Schools of Engineering
Department/Division/School: School of Computing, Informatics and Decision Systems Engineering
Proposing Faculty Group (if applicable): Computer Science, Computer Systems Engineering, Informatics

Proposal Contact
Name: Allison Curran
Title: Assistant Director of Academic Services
Phone Number: (480)965-3199
Email: Allison.Curran@asu.edu

Existing Program Information
Program Type: Degree
Degree Type: BSE-Bachelor of Science in Engineering
Name: Computer Systems Engineering
Academic Level: Undergraduate
If other specify
Concentration (if applicable) (Information Assurance)

Proposed Program Name
Name: Computer Systems Engineering
Concentration (if applicable) (Cybersecurity)

Plan code(s) for the program:
If this is a degree program that has multiple concentrations, list all program names and plan codes impacted.

ESCSEIBSE

Requested effective date: 2018-19
Select the catalog year for which students can begin applying into this program with the new name.
Note:
1. Name changes can only be implemented so as to be effective for a fall semester.
2. All existing and continuing students will be moved to the new name.
3. Students who complete the degree requirements prior to the fall effective date graduate under the old name.
Briefly describe the proposed change and rationale for the change:

Industry is not currently recognizing our concentration of Information Assurance for what it is. The industry standard buzz word is now "Cyber Security". Due to this shift in terminology, we are proposing to change our concentration name to cybersecurity. The plan code and requirements for the concentration will remain as is. This name change also aligns with what other universities are calling their concentrations covering similar material. So the change will also allow us to be more competitive with those universities.

Discuss the impact of this change on current students and/or enrollment:

Students who complete the requirement prior to the effective date of the change will graduate under the old name. All existing and continuing students will be moved to the new name. All affected students were notified of the name change.

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.

College/School/Division Dean name: James S. Collofello

Signature

Date: 3/6/20

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.

University Approval(s)

Graduate Education (if applicable)

Name:

Signature: 

Date: / /20

Office of the University Provost

Name:

Signature: 

Date: / /20