

## PROPOSAL TO CHANGE THE NAME OF AN ACADEMIC PROGRAM (Degree, Concentration, Certificate, Minor)

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 <u>may not</u> 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: Department/Division/School:	College of Liberal Arts and Sciences School of Historical, Philosophical and Religious Studies				
<b>Proposing Faculty Group</b> ( <i>if applicable</i> ):	History				
Proposal Contact					
Name:	Kathleen Given	Title:	Assistant Director		
Phone Number:	480 727 4029	Email:	Kathleen.Given@as	u.edu	
<b>Existing Program Information</b>					
Program Type:	Certificate	Academic Leve	l:	Undergraduate	
Degree Type: Certificate If other specify					
Name:	Political Thought and Leadership	Concentration	n (if applicable)	( )	
Proposed Program Name					
Name:	Political History and Leadership	Concentration	n (if applicable)	( )	
Plan code(s) for the program:					

# Plan code(s) for the program:

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

## Requested effective date: 2019-2020

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:

The proposed change in name is necessary to distinguish the program from the new School of Civic and Economic Thought and Leadership. The current name of the program confuses both students and donors, who tend to associate it with SCETL and not with the School of Historical, Philosophical and Religious Studies, where the program resides. Furthermore, the proposed new name is more in line with the required courses of the program in which political history is the major focus.

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

We don't anticipate any negative impact on students or enrollment. The name change will clarify that the program is focused on political history. The program will work diligently on re-branding the program using the new name, and will continue to recruit new and support existing students

DEAN APPROVAL(S)					
This proposal has been approved by all necessary unit ar	nd College/School levels of review. 1 recommend implementation of				
the proposed name change.					
College/School/Division Dean name: Signature College/School/Division Dean name: (if more than one college involved)	ore 6 7 0Bre. 4/26/2018				
	Data: / /20				
Signature Date: / /20					
Note: An electronic signature, an email from the dean or dean's designee, or a $P \square F$ of the signed signature page is acceptable.					
University Approval(s)					
Graduate Education ( <i>if applicable</i> ) Name:					
Signature:	Date: / /20				
Office of the University Provost Name:					
Signature:	Date: / /20				