

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.

**PROGRAM INFORMATION**

**College/School/Institute:** Watts College of Public Service and Community Solutions  
**Unit(s) within college/school responsible for Academic program (Academic ORG):** CPP  
**Requested effective term:** Fall and year: 2019

**Plan Description:** Minor  
**Degree/Program Offered:** Tourism Development and Management  
**Plan Code:** PPTDMMIN  
**CIP Code:**

Current Information:		Proposed Information	
<b>Organization Code:</b>	CPP	<b>Organization Code:</b>	CCOMRES
<b>Description:</b>	Watts College of Public Service and Community Solutions	<b>Description:</b>	School of Community Resources and Development
<b>Contact:</b>	UCENT 550	<b>Contact:</b>	UCENT 550
<b>Email/Phone:</b>	scrd@asu.edu   602-496-0550	<b>Email/Phone:</b>	scrd@asu.edu   602-496-0550

**Rationale for the proposed change:**

The minor currently falls under CPP academic organization; however, it needs to belong to School of Community Resources and Development. This change would fix the current issues in minor not displaying in degree search in the department website. The Tourism Development and Management minor has always been managed within the school and all courses are offered in the department.

**PROPOSAL CONTACT**

**Name:** Olya Lykhar **Title:** Manager of Academic Advising  
**Phone Number:** 602-496-1186 **Email:** olykhar@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:** Siân Mooney  
**Signature** Siân Mooney **Date:** 3/8/2019

**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)**

Approved by Graduate Education  
*(if applicable)* \_\_\_\_\_ Date: \_\_\_\_\_

Office of the University Provost  
**(final approval)** \_\_\_\_\_ Date: \_\_\_\_\_

Processed by- University Registrar's Office

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