This form must be completed when a new academic program is created. The form is required to clearly define the characteristics of the program. This program and its code will become part of UC’s official list of programs. It will be used to identify students in the program and may appear on the student’s transcript at the time of certification. Additionally, it may be reported as a unique program code to the Ohio Board of Regents (OBR) and so would be reported every term to OBR along with each student’s enrollment record. Review by the appropriate College Dean and the Provost’s Office is required prior to student information system (UniverSIS) code assignment. A copy of the new program’s curriculum, as well as OBR approval (if appropriate), must be attached.

Program award (e.g., Bachelor of Arts): _____________________________________________

Certificate programs only: Should the program be submitted to the Department of Education to determine if it is eligible for federal financial aid? ___ No ___ Yes

(If yes, additional information will be sent to you by the Student Financial Aid Office.)

Program academic area/major (e.g., History): _______________________________________

Number of credit hours required for the academic program: quarter hours:_____ semester hours:_____

Length of the academic program (in years): _______________________________________

Credit level of the academic program: ___Undergraduate   ___Graduate   ___Professional

Beginning term of the academic program: _______________________________________

Special comments or characteristics of the program (e.g. distance learning, etc.):

_____________________________________________________________________________

Submitted by: ________________________________       Date: ____________

Phone number: ________________________________       Mail Location: ____________________

Approval — College Dean:_________________________       Date: ____________

Approval — Graduate School:_______________________       Date: ____________

Approval — Provost’s Office:_______________________       Date: ____________

Submit the completed form to the Office of the Registrar, ML 0060.

Requests for special fee consideration must be submitted separately to the Office of Budget and Financial Services