Curriculum Review Committee

Curriculum Manager
email: curriculum@gbcnv.edu

New Program Form

SECTION 1: SUBMITTER INFORMATION

Name:of submitter:_____   Phone Number: _____

Email Address: _____   Submission Date: _____

Department: _____GBC Center: _____ Building & Room #:_____

Have you received approval from Department Chair?   Yes   No

If you have not received approval, <u>do not submit</u> to the Curriculum Manager.

SECTION 2: NEW PROGRAM INFORMATION

A completed Academic Program Proposal packet must be attached at the time of submission.

Effective Term:

Program Title:

Is this program offered at any other NSHE institution?	UNR	UNLV	CSN	TMCC	NSC	WNC

Program delivery :

   In-Person Only   Web-based only (all courses offered online**)**   Hybrid (50% or more courses offered online)

Program delivery description:

Catalog Page: Attach a sample of the program catalog page.

(Bachelor's ONLY) Admission Term Deadline: Fall   Spring   Summer

(Bachelor's ONLY) Admissions Requirements:

(Bachelor's ONLY) Degree Requirements:

Summary of proposed program:

SECTION 3: APPROVALS

Submitter

Name: _____

Signature: _____

Date:

Department Chair

Name: _____

Signature: _____

Date:

This form will not be accepted without the above signatures.

Curriculum Review Chair

Name:_____

Signature: _____

Date: _____

Curriculum Manager

Name: _____

Signature: _____

Date: _____

Dean

Name: _____

Signature: _____

Date: _____

Vice President of Student and Academic Affairs

Name: _____

Signature: _____

Date: _____