

**UNDERGRADUATE**

**PROGRAMS**

**NEW**

**New Undergraduate Minor Proposal**

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| **APPROVAL PROCESS FOR ESTABLISHING A MINOR** | | | | | | | |
| A minor is an academic program of at least 18 credits (9 at junior/senior level) that supplements a major degree program. Completion of a minor is recorded on a student’s transcript. Coursework in a minor may include courses from several disciplines and should include courses at the 100 through 400 course level.  After approvals/signatures have been obtained at the academic unit level, completed proposal should be forwarded to the Provost’s Office. Upon receipt, the proposal is submitted to the chair of the Undergraduate Curriculum Committee for review. | | | | | | | |
| **UNIT** | | | **DEPARTMENT** | | | | |
|  | | |  | | | | |
| **PROPOSED MINOR NAME** | | | **EFFECTIVE CATALOG CYCLE** | | | | |
|  | | |  | | | | |
| **PURPOSE** | | | | | | | |
| *Insert overall goals and objectives (a list or bullet points are recommended).* | | | | | | | |
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| **CURRICULUM** | | | | | | | |
| 1. **Intended student learning outcomes and aligned instructional and assessment activities** | | | | | | | |
| *Insert top 3-5 measurable learning outcomes, and for each outcome describe how it will be assessed (e.g., through rubrics, analysis of specific test questions, etc.).* | | | | | | | |
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| 1. **Program of study** | | | | | | | |
| *List required courses, elective courses, and educational experiences.* | | | | | | | |
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| **NEED** | | | | | | | |
| 1. **Student demand** | | | | | | | |
| *Please provide a brief bulleted summary. Include 5-year anticipated enrollment projection.* | | | | | | | |
|  | | | | | | | |
| 1. **National, state or local market demand** | | | | | | | |
| *Please provide a brief bulleted summary.* | | | | | | | |
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| **IMPACT** | | | | | | | |
| *Insert broad information.* | | | | | | | |
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| **ALIGNMENT WITH CAMPUS AND ACADEMIC UNIT PRIORITIES AND GOALS** | | | | | | | |
| *Insert brief narrative or bullet points regarding mission and goals alignment.* | | | | | | | |
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| **POTENTIAL DUPLICATION** | | | | | | | |
| *Does this program, or one similar, exist on the campus or across the UM System? Rationale? Insert explanation of potential duplication and rationale.* | | | | | | | |
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| **COSTS** | | | | | | | |
| *Indicate revenue stream and anticipated cost for program delivery.* | | | | | | | |
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| **MARKETING STRATEGIES/APPROACHES** | | | | | | | |
| *Provide brief bulleted summary. Insert marketing strategies/approaches.* | | | | | | | |
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| **SUPPORT BY ACADEMIC UNIT(S) AND DEAN(S)** | | | | | | | |
| *Attach letter of support of academic unit(s) and dean(s).* | | | | | | | |
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| **PLANS FOR ACCREDITATION** | | | | | | | |
| *Professional and regional accreditation notification if applicable; Insert plans for accreditation.* | | | | | | | |
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| **ATTACHMENTS** | | | | | | | |
| *List attachments and attach.* | | | | | | | |
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| **COMPLETED BY** | | | | | | | |
| **Contact Name:** |  | | | **Title:** |  | | |
| **Email Address:** |  | | | **Phone:** |  | | |
| **APPROVALS** | | | | | | | |
| **Department/Program Chair/Director:** | |  | | | |  |  |
|  | | *Type name here and sign above* | | | |  | Date |
|  | |  | | | |  |  |
| **Academic Unit Curriculum Committee Chair:** | |  | | | |  |  |
|  | | *Type name here and sign above* | | | |  | Date |
|  | |  | | | |  |  |
| **Academic Unit Dean:** | |  | | | |  |  |
|  | | *Type name here and sign above* | | | |  | Date |
|  | |  | | | |  |  |
| **Undergraduate Curriculum Committee Chair:** | |  | | | |  |  |
|  | | *Gayle Levy* | | | |  | Date |
|  | |  | | | |  |  |
| **Academic Affairs/Deputy Provost:** | |  | | | |  |  |
|  | | *Cynthia Pemberton* | | | |  | Date |
|  | |  | | | |  |  |
| **Transmitted to Registrar:** | |  | | | |  |  |
|  | |  | | | |  | Date |
|  | |  | | | |  |  |

Submit form electronically to Amy Watson ([watsonar@umkc.edu](mailto:watsonar@umkc.edu)).