MIDLAND UNIVERSITY

Propose/Revise
Undergraduate Certificate of Completion

To propose or revise an Undergraduate Academic Certificate, please complete this form, write a proposal as directed below, and obtain the necessary signatures. Please email the completed documents to the chair of the Curriculum Committee. See the academic calendar for submission deadlines. An example proposal is available upon request.

Course of Study (Academic Certificate Name):	
School/College:	
Fulltime Faculty Sponsor:	
Date:	

PROPOSAL SUMMARY

Please briefly explain what you are proposing or seeking to change:

Please attach an extensive proposal that addresses the following items, numbering each point as indicated:

(1) Certificate description including <u>final</u> text for the Academic Catalog.
(2) Certificate Learning Outcomes, Curriculum Map/Matrix, and Plan for Annual Assessment
(3) Description of all courses detailing required vs. electives, credits, prerequisites, and course rotations. *Courses must already be from a subset of the current offerings. Certificates must be 12-18 credits with at least 3 credits of upper-division courses. No more than 50% of courses may overlap with a student's major.*
(4) Market place-back analysis: ex. evidence that there is demand and value for prospective and current students (provide documented and cited evidence); *Midland University's vision is that certificates have broad, interdisciplinary appeal.*
(5) Additional evidence required: (a) impact on current students and intended targeted population for enrollment, (b) impact on any programs including courses used, (c) financial implications for the university, (d) enrollment restrictions (ex. what majors may or may not add the Certificate), (e) other information, as needed.

APPROVALS	
Fulltime Faculty Submitting Proposal *(signature)*	**Date**
Department Approval: Chair (if applicable) *(signature)*	**Date**
School or College Approval: Dean *(signature)*	**Date**
Additional School or College Approval: Dean *(signature)*	**Date**
Additional School or College Approval: Dean *(signature)*	**Date**
Additional School or College Approval: Dean *(signature)*	**Date**
Additional School or College Approval: Dean *(signature)*	**Date**
Curriculum Committee: Chair *(signature)*	**Date**
Academic Affairs Approval: VPAA *(signature)*	**Date**
PROCESSING	

Received by Registrar	**Date:**	
Added to Catalog	**Date:**	
Added to Nexus	**Date:**	

Questions about this form? Contact the Curriculum Committee