Curricular Modification: Category III

Minor Program Revision

Levels of Review: Program – School – Provost’s Office

Review the [Curriculum Modifications webpage](https://www.ohsu.edu/education/new-academic-programs-and-curriculum-modifications) for the deadlines by which proposals need to be submitted to the Office of the Provost for the proposed implementation date.

## Program Information

School/College:

Degree(s): Major:

Contact’s Name: Contact’s Email:

## Proposed Implementation Date

Academic Year:

Term (if relevant):

NOTE: If you are revising electives, provide both the proposed academic year andterm. Otherwise, all other changes should occur effective summer terms, to align with a catalog year, and you only need to include the proposed academic year.

## Proposed Minor Revision (Select all that apply)

| Course Revisions:  Revise course description(s)  Revise course designation(s):  Subject code  Number  Title  Credits  Level  Revise prerequisites  Eliminate/sunset a course  Add a course (not a new requirement and fits into an existing elective/selective) | Program Revisions:  Revise graduation requirements  Revise degree requirements due to SLO/competency revisions | Miscellaneous:  Change program responsibility from one department to another  Revise course sequencing  Other, describe: |
| --- | --- | --- |

NOTE: You are encouraged to discuss your proposal with the Registrar’s Office during its development stage (contact [hyattg@ohsu.edu](mailto:hyattg@ohsu.edu)). The Registrar can help you understand how best to represent the desired curricular changes and can provide guidance on course numbers, titles, credits, and descriptions.

## Proposal Summary

Below, **provide a concise summary of each revision** included in the proposal. **Explain how the program and/or course is currently designed, structured, described, or designated, and how this will change if the proposed revision is implemented (e.g., updated course description, credit hours, course title, etc.). State if the revision alters the total credits for degree completion, and how.** Delete the example provided (in italics) before submission.

*Example: Add two new classes to the major: AAA 582 (3 cr.) and BBB 519 (4 cr.). Remove 7 cr. of electives so the change is credit-neutral.*

## Proposal

The section is designed to gather information that is essential for accreditation purposes and to facilitate academic programs’ development and improvement. Respond to each of the following prompts/questions:

1. **Provide context for this proposed revision by describing the rationale and the expected benefits and outcomes from its implementation.** The rationale could include changes in professional standards, advances in the field, feedback from relevant and interested parties, or alignment with institutional/school/programmatic goals, among other reasons. **Consider the benefits for students, faculty, staff, finances, accreditation, etc.**
2. **Does this revision impact other programs in the department or school/college? If yes, explain the impact and document who you consulted about managing this impact.**
3. **How does the revision support the program and school/college’s goals or strategic plans?**
4. **Are there resources (staff, technological, financial, etc.) that are needed to implement this revision that are not currently available to your program? If yes, explain the resources that are needed and the proposed solution for gaining these resources.**

## Additional Instructions

If the proposal includes any change(s) to the program requirements, include this supplemental material:

1. Track changes version of the Program Requirements Guide (contact the Registrar, [hyattg@ohsu.edu](mailto:hyattg@ohsu.edu), for the original Word document or if you have questions about how to complete this task).

### Authorization

By signing this form, you confirm your request to modify the academic program.

All requests must include the signature of the program director and applicable associate dean.

Program Director Signature Date

Associate Dean Signature\*\* Date

\*If necessary. Consult the Office of the Provost for guidance on whether your proposal will require regional accreditation approval.

\*\*Following the Associate Dean’s signature, the Office of the Dean will submit the form as verification of school-level approval to the Office of the Provost-Academic Affairs ([ModifyCurriculum@ohsu.edu](mailto:ModifyCurriculum@ohsu.edu)) to initiate the university-level administrative review process.

Form updated: 6-19-24