Yes

No

## **Curriculum Revision Form**

Effective Date: FALL	Submission Date:					
Department:		College of:				
Contact Person:		Session Based:	Yes	No		
Major/Emp	hasis/Certification Name:					
If selection is "Deletion" compl	ete questions 3 & 4, then com	plete signatures.				
Revision to Curriculum – I PROGRAM GUIDE from -Used to change program na -Removes Major/Emphasis/O	University Catalog ATTA me and/or curriculum, effection	CHED. tive the upcoming academic				
1. Describe your Changes:						
2. Rationale for change, includi	ng changes to curriculum ob	ojectives:				
3. Will this change affect any Council for Teacher Education			approval of	the		

4. If this change	affects any other	department or	n campus, <b>please</b>	attach any em	ail notifications
between depart	ments.				

5. Does the revision meet University catalog definitions for majors, emphases, and certificates as appropriate?

Yes No.

6. Will additional resources or costs will be required?

Yes No

If so, what will be needed?

## **Definition of an Emphasis**

Area of Emphasis is a specific subject area that exists within an approved degree program and major. At Pittsburg State University a minimum of 12 credit hours and no more than 24 credit hours are expected for an area of emphasis in a baccalaureate degree program.

## **Definition of Certificate Program**

A certificate program can be undergraduate or graduate in course content and provides a specific body of knowledge for personal or career development or professional continuing education. Certificates may be taken while also pursuing a degree or independent from any other studies at Pittsburg State University. It is recommended that if the student is only pursuing a certificate and not in conjunction with a degree and wishes to apply for federal financial assistance that they visit with personnel in the Student Financial Assistance office regarding the eligibility for aid for the certificate of interest. At Pittsburg State University a certificate can range from 12 credit hours to 24 credit hours.

## **Authorization Sign-Off Sheet**

**Checklist: Check once verified.** \_\_\_\_\_Program guide from current catalog. \_\_\_\_\_Academic Planning Excel attached. \_\_\_\_Course Id's match Course names. \_\_\_\_Course hours are correct. \_\_\_\_Listed courses are currently active \_\_\_\_Needed Documentation attached. -Approved: Department Chair/Director Signature: Date: -Approved: College Curriculum Committee Signature: Date: -Approved: Dean of College Signature: Date: -Approved: Council for Teacher Education (if applicable Signature: Date: -Approved: Graduate Council Chair Signature: Date: