CURRICULUM PROPOSAL COVER SHEET

| | Undergraduate | COLLEGE | CHS | RCCPS |
|----------------------------|--|--|--|--|
| hool | | | | |
| ementation (Term a | nd Year, e.g., FALL 2026) | | | |
| oposed Action: | | | | <u> </u> |
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| pe of Proposal <i>(sel</i> | ect all that apply): | | | |
| EGREE (See attache | ed Curriculum Development | Timeline) | | |
| r or Degree Progran | | forma) | | |
| | | _ | | |
| | | | - | ajor or Degree |
| | | | | |
| e Course(s) in a Deg | ree Program (attach previo | us and proposed curr | ricular map) | |
| an Existing Course | | - | | |
| Course Description | | Change in Cours | se Credits | |
| | | | | |
| r (attach curricular i | тар) | Minor Elimination | on | |
| | | | | |
| nology | | Other (explain): | | |
| | oposed Action: Type of Proposal (selection) EGREE (See attacher or Degree Program beyance mination or Degree Program or a Major or Degree Program or a Major or Degree Program Existing Course Course Description or (attach curricular in a course program or | rpe of Proposal (select all that apply): EGREE (See attached Curriculum Development or Degree Program (attach new program program program or Degree mination or a Major or Degree e Course(s) in a Degree Program (attach previoran Existing Course Course Description | rpe of Proposal (select all that apply): EGREE (See attached Curriculum Development Timeline) or or Degree Program (attach new program pro forma) beyance Program Elimination Reinstatement of a Major or Degree Change in Delivity e Course(s) in a Degree Program (attach previous and proposed currican Existing Course Change in Course Course Description Change in Course Change in Course (attach curricular map) Minor Elimination | ppe of Proposal (select all that apply): EGREE (See attached Curriculum Development Timeline) r or Degree Program (attach new program pro forma) beyance Program (attach new program pro forma) beyance Program (attach new program pro forma) beyance Change in Delivery Method for Method f |

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| Is there a fee attached to the course or degree program? Yes | No | | | | |
|---|-----------------------------------|--|--|--|--|
| If yes, describe amount/rationale | | | | | |
| | | | | | |
| If yes, has IT been consulted for any possible network/security implications? Incl consulted: | ude name(s) of person(s) and date | | | | |
| Does this change affect multiple departments? (e.g., course is a prerequisite; curr | riculum requires cognate courses) | | | | |
| Name(s)ofperson(s)consulted: | Date: | | | | |
| Name(s)ofperson(s)consulted: | Date: | | | | |
| Name(s) of person(s) consulted: | Date: | | | | |
| Department/School* Faculty Vote (include date and vote count): | | | | | |
| Documents Attached: | | | | | |
| Attach Syllabus (if course level). Make sure Syllabus includes all the information of the most updated Marywood University Syllabus Template. Attach old curricular map (if program level). Attach new curricular map (if program level). | List other documents: | | | | |
| Approval Signatures Required BEFORE the Curriculum Committee Meeting: | | | | | |
| Department Chair/School Director: | Date: | | | | |
| ☐ Approved | | | | | |
| ☐ Not approved Signature: | | | | | |
| Department Chair/School Director: | Date: | | | | |
| ☐ Approved | | | | | |
| ☐ Not approved Signature: | | | | | |
| Dean of Academic Unit: | Date: | | | | |
| ☐ Approved | | | | | |
| ☐ Not approved Signature: | | | | | |
| University Registrar: | Date: | | | | |
| Approved | | | | | |
| ☐ Not approved Signature: | | | | | |
| Approval Signatures Required AFTER the Curriculum Committee Meeting: | 1 | | | | |
| Curriculum Committee Chair: | Date: | | | | |
| Chief Academic Officer: | Date: | | | | |
| If required, date approved by Board of Trustees (enter N/A as appropriate): | Date: | | | | |

^{*}Faculty vote should include all full-time faculty in a school/department

Curriculum Development Timeline. One-Year Program Approval Process

| Fall Start | One-Year Program Approval Process | Spring Start |
|-----------------------------|---|-----------------------|
| Late - May Early June | New Program Workshop Market analysis requirement Enrollment and budget projections | December |
| June-August | Development of proposals consulting with: | December -January |
| August- September | Review of New Program Proposal: | December |
| Early Fall Semester | Departmental Approval Chair Signature Dean's Signature | Early Spring Semester |
| September - November | Obtain Curriculum Committee Approval Sent to UCC chair at least 10 days before Sept., Oct., or November UGCC meetings. Review UCC Instructions for documents required of New Program Approvals. | February - April |
| November and/or February | Approval by Administration and BOT, as needed Submission to MSCHE & Program Accreditor if needed | April and/or October |
| Spring / Summer | Notification of appropriate agencies (Post MSCHE approval): US Department of Education SEVIS Homeland Security PA Approval | Summer/ Fall |
| Fall | Start Program | Spring |