

Academic Program Impact Information

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Change received: ___

DEGREE AUDIT ADJUSTMENT

Please specify the academic program major, minor, or specialization impacted by the requirement adjustment. Use a separate form for each academic program. Academic Program *Major*: Academic Program *Minor*: Academic Program *Specialization*: **Requirement Updates** Please list any course additions, deletions, or miscellaneous requirement updates. **Add** the following courses to the requirement: **Delete** the following courses from the requirement: Miscellaneous requirement updates (e.g. increase or decrease the amount of credits required, change the QPA requirement, etc.) Additional Department Impact ☐ NO If yes, please specify the department(s)/program(s): Administrative Certification (To be completed by the Department Chairperson) This is to certify that I have reviewed the information presented on this form for accuracy and completeness. Signature of Department Chairperson Date - FOR OFFICE USE ONLY -

Change processed: ___