***Establishment of a dual degree with N.C. State University requires completion of this MOA and signatory approval by the Provost. In addition, SACSCOC must be notified 6 months prior to implementation of this agreement.***

***Complete the following:***

**I. N.C. State Participation:**

**Level of Degree:** Choose **College Participating:** Choose **Other Participating College(s):** Enter text

**Full Title of Degree Conferred (Include concentration title if applicable.):** Enter text

**Name and contact information for the primary developer of Agreement:** Enter text

 **II. Participating Partner Institution: *If multiple partners, complete separate form for each.***

**Name of Partner Institution:** Enter text

**Location of Institution:**  Enter text

**Name and contact information for the primary developer of this Agreement (include address, phone, email, etc.)**

Enter text

**Level of Degree:** Choose **or** Enter text

**Full Title of Degree Conferred (Include concentration title if applicable):**

Enter text

**Partner Institution Accreditation Status:** Choose

**Other Accreditation, Licensure or Approving Body Information (Ex: ABET, EQUIS/EFMD, AACSB):**

Enter text

**Duration of Agreement: *(Minimum 5 years. Unless otherwise specified – prior to end of 5th year, agreement must be approved for extension.)***

Enter text **III. Timeline:**

**Proposed Start Date of Agreement:** Enter date

**Expected Date for recruitment and advertising:** Enter date

**Expected Date of student matriculation/enrollment in dual degree program:** Enter date

 **IV. Attachments:**
**In addition to this MOA, attach other applicable documentation and list each attachment/appendices below:
*(ex: Memorandum of Understanding (broad agreement of partnership), prospectus (if substantive change))***

Enter text

**V. Collaborative Objectives:**

1. **What is the purpose and benefits of the dual degree partnership?** Enter text
2. **What evidence of institutional/program comparability exists (rankings, joint faculty research, publications, etc.)?**

Enter text

1. **What are the areas of mutual interest? Past partnerships?** Enter text
2. **What are the partner institutional priorities?** Enter text
3. **How does this agreement fit with NC State Institutional Mission?** Enter text
4. **How does this agreement fit with NC State College’s Mission?** Enter text

 **VI. Administration:**

1. **How was the proposed dual degree developed? *Describe the process by which NC State faculty worked with the partner faculty to plan program content, select courses, and choose mode of delivery.***Enter text
2. **How will the proposed program be administered*? Include detail regarding each partner responsibilities related to administration, academic policy enforcement, logistics, and student recruitment, registration, admissions. Attach organizational chart if applicable.***Enter text
3. **How will tuition and fees be coordinated?** Enter text
4. **Proposed NC State SIS code for designated students participating in dual degree. (max 10 char)** Enter text

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VII. NC State Policy Disclaimer for this agreement:**

*“Students participating in this coordinated dual degree program will be subject to all applicable*

*N.C. State University policies and regulations.”*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VIII. Expected Annual Faculty/Student Participation:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| N.C. State | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| Students | # | # | # | # | # |
| Faculty Exchange | # | # | # | # | # |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Partner Institution | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| Students | # | # | # | # | # |
| Faculty Exchange | # | # | # | # | # |

**IX. CURRICULUM DESIGN:**

1. **Provide an overview of how the degree requirements for each Institution will be completed as part of this dual arrangement.** Enter text
2. **Provide list of NC State course requirements for degree and equivalency to related courses at Partner Institution. *(Attach as semester-by-semester display of course requirements and provide a list of course requirements and equivalencies for the dual degree program):*** Enter text
3. **Provide list of Partner Institution’s course requirements, analysis of course content, and equivalency to related courses at NC State.** Enter text
4. **Describe how and when transfer courses will be evaluated.** Enter text
5. **If Thesis requirement, provide details (supervision/credit).** Enter text
6. **What is the total percentage of courses taken at Partner Institution?** Enter text
7. **What is the total percentage of courses taken at NC State? (For graduate programs at least 50% of hours and for undergraduate programs at least 25% must be taken at NC State)** Enter text
8. **To be eligible for a bachelor’s degree, a student must have earned at least 30 of the last 45 hours of credit through NC State courses. If this requirement will not be met, please explain.** Enter text
9. **Transfer hours allowed by NC State.** Enter text
10. **Transfer hours allowed by Partner.** Enter text
11. **Will course credit from Partner Institution count toward NC State GPA calculation? (If yes, explain)** Enter text
12. **Describe other requirements. (residence, comprehensive exams, internships, language, etc)** Enter text
13. **Provide list of courses that will be offered totally online and in hybrid format. Indicate the applicable format next to each course.** Enter text
14. **Will NC State courses be offered at an off-campus site either through DE or face-to-face? If so, has the site been approved by SACS?** Enter text

**X. ASSESSMENT/MEASURABLE OUTCOMES:**

**What are the measurable student learning outcomes for this academic arrangement and how will they be assessed?**

***Note: Outcomes for the existing degree must be met in the dual degree arrangement. Provide any additional outcomes related to the academic collaborate arrangement***

Enter text

**XI. FACULTY CREDENTIALS FROM THE PARTNER INSTITUTION:**

**Provide a list of the faculty directly involved in teaching courses as part of this program of study. *Attach the CV for each.***

Enter text

**XII. INSTITUTIONAL COMMITMENT AND RESOURCES:**

**NC State University:**

1. **Provide description of NC State’s commitment to this academic arrangement.** Enter text
2. **Provide detail regarding the funding for this arrangement (amount,source,duration).** Enter text
3. **Provide detail regarding facilities and space (amount,source,duration).** Enter text
4. **Provide detail regarding library resources (amount,source,duration).** Enter text
5. **Provide detail regarding equipment required for this arrangement.** Enter text
6. **Other:** Enter text

**Partner Institution:**

1. **Provide description of Partner’s commitment to this academic arrangement.** Enter text
2. **Provide detail regarding the funding for this arrangement (amount,source,duration).** Enter text
3. **Provide detail regarding facilities and space (amount,source,duration).** Enter text
4. **Provide detail regarding library resources (amount,source,duration).** Enter text
5. **Provide detail regarding equipment required for this arrangement.** Enter text
6. **Provide detail regarding any institutional policy or practice that would prohibit student participation based on race, gender, ethnicity, or religion.** Enter text
7. **Other:** Enter text

 **XIII. REVIEW SCHEDULE FOR AGREEMENT**:

**All agreements will be for a period of five years, unless otherwise specified. Prior to the end of the fifth year the agreement must be reviewed and re-approved if requesting an extension. Upon the scheduled review date, responses to review criteria will be required to be completed and provided to the university review committee. If the agreement will be discontinued, a teach-out plant will be required for those students remaining in the program.**

**As part of this agreement, specify the following:**

**What criteria will be used by the participating NC State College to determine whether the program should continue?** Enter text

**In what year will this agreement be evaluated?** Enter text

**XIV. SACSCOC disclaimer to be followed as part of this Agreement:**

For agreements with Partner institutions that are not accredited by SACSCOC, the following disclaimer must be included in the Memorandum of Agreement and in any advertised postings by the Partner institution in compliance with SACSCOC procedures related to collaborative academic agreements. The NC State program coordinator for this agreement must monitor the Partner institution’s statements of relationship to ensure conformance with this disclaimer. In addition, neither Member nor Partner institutions may use the SACSCOC logo. Its use is reserved exclusively for the Southern Association of Colleges and Schools Commission on Colleges.

***Disclaimer Statement:***

*“North Carolina State University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award* ***[state degree levels]****.* ***[Name of Partner institution]*** *is not accredited by the Commission on Colleges and the accreditation of North Carolina State University does not extend to or include [name of Partner institution] or its students. Further, although North Carolina State University agrees to accept certain course-work from* ***[Name of Partner institution]*** *to be applied toward an award from North Carolina State University, that course-work may not be accepted by other colleges or universities in transfer, even if it appears on a transcript from North Carolina State University. The decision to accept course-work in transfer from any institution is made by the institution considering the acceptance of credits and course-work.”*

*\_\_\_\_\_\_\_\_\_\_*

**XV. This agreement must follow the stipulations listed below to be in compliance with N.C. State and SACS policies:**

[ ]  The SACSCOC disclaimer is included in this agreement and will be included in any marketing for this dual degree arrangement.

[ ]  This agreement requires at least 25% of the credits for an Undergraduate program and 50% for a Graduate program be awarded by N.C. State.

[ ]  The SACSCOC logo does not appear on this agreement and will not be used by the N.C. State or the Partner institution.

[ ]  The Partner institution will provide timely access to their materials, physical site(s), and personnel in conjunction with accreditation reviews, if requested.

[ ]  This agreement will be reviewed in 5 years from the date of final signature.

**The signing of this agreement and any supporting documentation assures compliance with the requirements of this Memorandum of Agreement. Any changes will require approval by the signatories and other approval bodies as applicable.**

**Signatures – Memorandum of Agreement**

IN WITNESS WHEREOF, the authorized representatives of the parties have executed this agreement on the date(s) indicated below:

For, and on behalf of,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
(Insert Partner Institution Name/Location)

For, and on behalf of,

North Carolina State University,
Raleigh, NC - USA

**The signing of this agreement and any supporting documentation assures compliance with the requirements of this Memorandum of Agreement. Any changes will require approval by the signatories and other approval bodies as applicable.**

|  |  |
| --- | --- |
| **NC State Signatures:** | **Partner Institution Signatures** *(insert name/title of each signatory)* |
|  |  |
| Department Head  | Date  |   | Date |
|  |  |
| College Course & Curriculum Committee  | Date |   | Date |
|  |  |
| College Dean  | Date  |  | Date |
|  |  |
| Administrative Board of the Graduate School **or** University Course & Curricula Committee | Date |  |
|  |  |
| Dean of Graduate School **or** Dean of DASA  | Date |  |
|  |  |
| SACS Liaison/SCRT  | Date |  |
|  |  |
| Provost, N.C. State University  | Date |  |