# Routing for On-Campus Approval of External Dual Degree Program Actions

# NC State

Degree Title:
CIP Code (6 digits):
See https://nces.ed.gov/ipeds/cipcode/default.aspx?y=55 for information about CIP codes
Proposing College(s): Program Contact:
Partnering Institution
Name of Partner Institution:
Title of Degree:
Program Contact:
Proposed Effective Date
Routing of Action: Indicate date when the following occurs
Completed Proposal (Memorandum of Agreement (MOA) is required)
Department Head reviews
College Curriculum Committee (undergraduate or graduate) recommends
College Dean reviews
Proposal moves to Office of Undergraduate Courses and Curricula or Graduate School for routing Recommended by Vice Provost, DELTA, if applies
Substantive Change Review Team (SCRT) reviews
If SACSCOC notification is required, SCRT prepares letter for Chancellor to send to SACSCOC
Office of Global Engagement reviews (if institution is outside the U.S.)
University Courses and Curriculum Committee or Administrative Board of the Graduate School recommends
Associate Deans Council or Graduate Operations Council informed
Dean (Graduate School or Division of Academic and Student Affairs) approves*
Proposal moves to the Provost's Office for routing
Vice Provosts informed
Deans' Council recommends
Executive Vice Chancellor and Provost approves*
Chancellor's Cabinet recommends
University Council informed
Board of Trustees subcommittees informed
Chancellor approves
Accreditation Liaison prepares SACSCOC letter, if applicable
* Signature is required on the Memorandum of Agreement (MOA)

#### MEMORANDUM OF AGREEMENT FOR DUAL DEGREE PARTNERSHIP Collaborative Academic Agreement

Establishment of a dual degree with North Carolina State University requires completion of this Memorandum Of Agreement (MOA) and signatory approval by the Provost. In addition, the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) must be notified 6 months prior to implementation of this agreement.

Complete the following and provide thorough explanation and answers to each item.

#### I. NC State Participation:

Level of Degree:

College Participating:

Other Participating College(s), if applicable: 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

Name and contact information for the program coordinator, if different from developer:

#### 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

Name and contact information for the program coordinator, if different from developer:

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:** (Note that the program cannot begin recruitment or matriculation of students until after SACSCOC notification and/or approval. SACSCOC reviews new program proposals twice per year.)

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: SACSCOC prospectus, letter of support from College Dean and/or Provost, organizational charts, faculty CV's) 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

3. What are the areas of mutual interest? Past partnerships? Enter text

4. What are the Partner Institutional priorities? Enter text

5. How does this agreement fit with NC State Institutional Mission? Enter text

6. How does this agreement fit with the 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 and recruitment timeline if applicable. (Examples of recruitment materials may be requested when pursuing SACSCOC approval). Enter text

3. How will tuition and fees be coordinated? Include detail regarding student enrollment and tuition at each Partner Institution. Include a statement regarding student financial responsibilities, such as "Students are responsible for personal expenses, transportation, textbooks and other course materials, and any required educational fees or taxes." Enter text

4. Proposed NC State SIS sub-plan code for designated students participating in dual degree. The sub-plan identifying the dual-degree students must align with the SIS plan code for the NC State degree program (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 policies and regulations at all Partner Institutions, even during semesters enrolled at the partnership institution(s)."

# VIII. Expected Annual Student and Faculty (if applicable) Participation during each year of the agreement:

NC 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? (At least 50% of hours for graduate programs and at least 25% for undergraduate programs 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 provide justification to 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 SACSCOC? 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, and a copy of the most recent assessment plan must be attached to all Memorandum of Agreement renewals. Provide any additional outcomes related to the academic collaborate arrangement.

#### Enter text

## XI. FACULTY CREDENTIALS FROM THE PARTNER INSTITUTION:

- 1. 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
  - a. Faculty at Partner Institutions who wish to serve as NC State Graduate Faculty members, advising graduate students and serving on graduate student advisory committees, must be nominated to the Graduate Faculty. Contact the Graduate School for more information. <u>https://www.ncsu.edu/grad/handbook/sections/1.3-gradfaculty.html</u>

## 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. If requesting a renewal, nine months prior to the end date of the agreement the required renewal documentation must arrive at the Graduate School or the Office of Undergraduate Courses and Curricula and Academic Standards. This will provide continuity in the university review process. 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 teachout plan will be required for those students remaining in the program. Results of the most recent assessment plan must be attached to renewal documents.

As part of this agreement, specify the following:

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

2. In what year will this agreement be evaluated (if not 5 years from the original effective date)? 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. SACSCOC Prospectus

The SACSCOC Prospectus should be attached to this document.

Please see <u>http://www.sacscoc.org/forms/principle/Prospectus-SubstantiveChange.docx</u> regarding SACSCOC prospectus requirements. For procedural guidance, please contact the Graduate School or the Office of Undergraduate Courses and Curricula and Academic Standards.

# XVI. This agreement must follow the stipulations listed below to be in compliance with NC 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 NC State.
- The SACSCOC logo does not appear on this agreement and will not be used by the NC 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.

# XVII. General Provisions

1. **Contact Person and Notices.** All notices under this Memorandum of Agreement should be delivered in writing, signed by the party giving notice, to:

 NC State
 Partner Institution

 Name
 Title

 Office
 Address

 Address
 Phone

 Email
 Z.

 Termination of this Agreement. This agreement may be terminated by either party upon

 ( ) days written notice to the other party. If the agreement is terminated, any

participants identified previous to the termination of the agreement will be allowed to complete their programs.

**3. Costs.** Each party shall be responsible for its own costs and expenses in implementing this program.

**4. Transfer.** Neither party may assign, delegate, or otherwise transfer any obligations under this Memorandum of Agreement without the prior written consent of the other party.

**5. Use of Marks.** Neither party shall identify the other in any promotional advertising or other promotional materials or to use the name of either party's trademarks, service marks, symbols, nicknames, or logos of either party, without the prior written consent of the other party, except to identify that the parties have entered into this Memorandum of Agreement.

6. **Compliance with Applicable Law.** The Partner Institution shall comply will all laws, ordinances, codes, rules, regulations, and licensing requirements that are applicable to the conduct of its business, treatment of personal information, and local agencies having jurisdiction and/or authority.

**7. Severability.** If any provision of this Agreement is held to be invalid or unenforceable for any reason, this Memorandum of Agreement shall remain in full force and effect in accordance with its terms disregarding such unenforceable or invalid provision.

8. Entire Agreement. This Memorandum of Agreement contains the entire agreement of the parties and there are no representations, inducements or other provisions other than those expressed herein. All changes, additions or deletions to this Memorandum of Agreement shall be in writing and executed by the authorized representatives of both parties.

Signatures – Memorandum of Agreement

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

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 (insert name/title of each signatory) Partner Institution Signatures

[Insert name and title] Dean of Graduate School or Dean of DASA

[Insert name and title]

[Insert name and title] Executive Vice Chancellor and Provost

[Insert name and title]