# Letter of Intent to Develop New Academic Degree Program

The following approvals must be obtained prior to sending the Letter of Intent to Develop a New Academic Degree Program to the UNC System Office.

**Institution** _____

**Degree Program Title (e.g. M.A. in Biology)**_____

**Reviewed and Approved By (Title)**

    **Provost:**
    **Faculty Senate Chair (if applicable):**
    **Undergraduate or Graduate Dean (if applicable):**
    **Academic College Dean:**
    **Department Chair:**
    **Program Director/Coordinator:**

## New Academic Proposal Process

New academic programs are initiated and developed by the faculty members. Approval of the Letter of Intent to Develop a New Academic Degree Program must be obtained from department chairs and college deans or equivalent administrators before submission to the UNC System Office review.

Directions: Please provide a succinct, yet thorough response to each section. Obtain the Provost's signature and submit the proposal via the PREP system to the UNC System Vice President for Academic Programs, Faculty, and Research, for review and approval by the UNC System Office. Once the Letter of Intent to Develop is approved, the institution can begin work on the formal Request to Establish a New Degree Program.

## Letter of Intent to Develop a New Academic Degree Program

| | |
|---|---|
| **Institution** | |
| **Joint Degree Program (Yes or No)? If so, list partner campus.** | |
| **Degree Program Title (e.g. M.A. in Biology)** | |
| **CIP Code and CIP Title (May be found at National Center for Education Statistics)** | |
| **Require UNC Teacher Licensure Specialty Area Code (Yes or No). If yes, list suggested UNC Specialty Area Code(s).** | |
| **Proposed Delivery Mode (campus, online, or site-based distance education). Add maximum % online, if applicable.** | |
| **Proposed Term to Enroll First Students (e.g. Spring 2019)** | |
| **List other programs in the UNC System (may be found at UNC System website)** | |

**SACSCOC Liaison Statement:** *(Provide a brief statement from the University SACSCOC liaison regarding whether the new program is or is not a substantive change.)*

**Program Summary**: (*Briefly describe the proposed program and summarize the overall rationale.*)

Include the following in your narrative:
- Ways in which the proposed program is distinct from others already offered in the UNC System (use the 4-digit CIP as a guide). Information on other programs may be found on the UNC System website.
- How this program supports specific university and UNC System missions.
- Collaborative opportunities with other UNC institutions as appropriate. (maximum length 500 words)

**Student Demand***: (Provide evidence of student demand.  Discuss the extent to which students will be drawn from a pool of students not previously served by the institution. Maximum length 1,000 words.)*

**Societal Demand:** *(Provide evidence of societal demand and employability of graduates from each of the following source types. Maximum length 1,000 words)*

- Labor market information (projections, job posting analyses, and wages)
    - Specific to North Carolina (such as ncworks.gov, nctower.com, or outside vendors such as Burning Glass)
    - Available from national occupational and industry projections (such as the U.S. Bureau of Labor Statistics)
- Projections from professional associations or industry reports
- Other (alumni surveys, insights from existing programs, etc.)

**For Doctoral Programs Only:**

Describe the following (maximum length 2,000 words):
- The research and scholarly infrastructure in place (including faculty) to support the proposed program.
- Method of financing the proposed new program (including extramural research funding and other sources) and indicate the extent to which additional state funding may be required.
- State the number, amount, and source of proposed graduate student stipends and related tuition benefits that will be required to initiate the program.

**Contact:** (List the names, titles, e-mail addresses and telephone numbers of the person(s) responsible for planning the proposed program.)

| Position Title | Name | E-mail Address | Telephone |
|---|---|---|---|
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

This Letter of Intent to Plan a New Program has been reviewed and approved by the appropriate campus authorities.

| Position Title | Signature | Date |
|---|---|---|
| Provost |  |  |
| Provost (Joint Partner Campus) |  |  |