

University of Connecticut
Degree Program/Major Processing Form

Requesters Information:

Name: _____
Title: _____
Department: _____
School/College: _____
Phone: _____

- If **creating a new** Degree Program/Major, please fill in the following:

Degree Program/Major Abbreviation (*as many as 10 characters*) _____
Degree Program/Major Name (*as many as 30 characters*) _____
Effective Year and Term: _____

- If **changing an existing** Degree Program/Major, please fill in the following:

Present Degree Program/Major Name: _____
New Name: _____
Effective Date: _____

Do you wish that all degree seeking students with this major be revised or only those who have their catalog year corresponding to the effective year term? Check only one below.

All degree seeking students Only those based on effective year term

- If **inactivating** a Degree Program/Major, please fill in the following:

Present Abbreviation of Degree Program/Major: _____
Present Name of Degree Program/Major: _____
Inactivation Date: _____

Approval Signatures:

Department Head: _____ **Date:** _____

Dean: _____ **Date:** _____

Board of Trustees (Designate) **Date**

Department of Higher Education **Date**

Vice Provost for Academic Affairs **Date**

Note: Enclose any supporting documentation regarding this request, such as meeting minutes from the School/ College indicating the approval of the requested change.