

# New Program of Study Worksheet

**Program of Study Title:** Click or tap here to enter text.

**Degree/Certificate Awarded:** Choose an item.

## General Information

**Person(s) developing the proposal**: Click or tap here to enter text.

**Department/Program initiating the proposal:** Click or tap here to enter text.

**Division**: Choose an item.

**Program Review Area:** Choose an item.

**Has the Dean reviewed and approved?**

 [ ]  **YES** [ ]  **NO**

 **If yes, provide Dean’s name and date of approval.**

Click or tap here to enter text.

**Was the market analysis completed?**

[ ]  **YES** [ ]  **NO**

**If yes, enter the date.**

Click or tap to enter a date.

**Has the Provost Cabinet reviewed and approved?**

 [ ]  **YES** [ ]  **NO**

 **If yes, provide date of approval.**

Click or tap to enter a date.

## Program Information

**Proposed Effective Semester (e.g., Fall 2023): Fall** Click or tap here to enter text.

**Minimum Credits:** Click or tap here to enter text.

**Minimum Billing Hours:** Click or tap here to enter text.

**Number of Semesters:** Click or tap here to enter text.

**Is Summer Semester Required?** [ ]  **YES** [ ]  **NO**

**Number of Weeks:** Click or tap here to enter text.

**Courses in the degree or certificate will be offered in the following modalities: (*select all that apply*):**

[ ]  **In Person**

[ ]  **Hybrid**

[ ]  **Hyflex**

[ ]  **Online**

[ ]  ORT

**Additional information regarding the format of the courses (*if necessary*):**

Click or tap here to enter text.

**List new courses needed for this certificate/degree:**

Click or tap here to enter text.

**Classification of Instructional Program (CIP) Code:** Click or tap here to enter text.

**Standard Occupational Classification (SOC) Code:**

These SOC codes will be used to determine the occupational information on the Degrees and Programs webpage for this program of study. The SOC codes must align with the CIP code. Provide at least one (1) SOC code, and up to four (4) codes:

1. Click or tap here to enter text.
2. Click or tap here to enter text.
3. Click or tap here to enter text.
4. Click or tap here to enter text.

## Additional Degree/Program Web Page Information

**Provide a brief overview for the website, including accreditation information and career information:**

Click or tap here to enter text.

**Admission Requirements:**

Is this a selective admissions program?

[ ]  **YES** [ ]  **NO**

If Yes,

Click or tap here to enter text. is a selective admissions program with additional requirements for admission. For detailed admissions requirements, contact Click or tap here to enter text. for assistance.

Program Cost Information
*Note: If there are multiple tracks and the cost varies depending on the track, provide rates for the least expensive option.*

**Annual Tuition Cost Per Year** *(in-district rate x Billing Hours / Number of Years)***:**

Click or tap here to enter text.

**Registration Fees Per Year** *(Registration Fee x Number of semesters / Number of Years)***:**

Click or tap here to enter text.

**Student Support Fees Per Year** *(Student Support Fee x Billing hours / Number of years)***:**

Click or tap here to enter text.

Perkins Grant Funding Information
See [Resources/Information document](https://www.lcc.edu/provost/senate/documents/cc/forms/resources-information.pdf) for further information

**Is the Program Occupational or Non-Occupational?**

[ ]  **OCCUPATIONAL**

[ ]  **NON-OCCUPATIONAL**

If an Occupational program, will Perkins funding be requested?

[ ]  **YES** [ ]  **NO**

**Based on State Criteria, does the proposed program provide:** *(check all that apply)*

[ ]  **High-Skill** [ ]  **High-Wage** [ ]  **In-demand**

## Purpose

**Explain the purpose of the certificate or degree:**

Click or tap here to enter text.

## Evidence of Current/Projected Need

**Explain the appropriateness of this certificate/degree to the mission/goals of the Division:**

Click or tap here to enter text.

**Explain the link this certificate/degree has to the LCC Essential Learning Outcomes:**

Click or tap here to enter text.

**List and explain the Program of Study Outcomes for this certificate/degree:**

Click or tap here to enter text.

**Explain how this certificate/degree differs from, and avoids duplication of, similar LCC Programs of Study (include a list of all individuals and departments consulted):**

Click or tap here to enter text.

**Identify resources needed to develop and support the certificate/degree. Include estimated costs:**

Click or tap here to enter text.

**When completed:**

* **Forward this completed worksheet and any attachments to your Program Director, Associate Dean, or Academic Coordinator.**
* **The documents will be reviewed.**
	+ **If the CIMT rep has questions, you will be advised.**
	+ **If no questions, your CIMT rep or designee will enter the information into the 5-Star ticket system and the process will begin.**

**If you wish to be advised of the status, please check with your CIMT rep. or designee.**

### AA Office Use Only:

|  | Status | Initials | Date |
| --- | --- | --- | --- |
| 1. | Received submitted 5-Star Ticket |  |  |
| 2. | Reviewed and approved by Provost Cabinet |  |  |
| 3. | Revised and approved by the Dean |  |  |
| 4. | Forwarded to Director of Assessment, Curriculum Committee-TRT, and Degree Works Administrator |  |  |
| 5. | Reviewed and approved by Director of Assessment |  |  |
| 6. | Reviewed by Curriculum Committee-TRT and report sent |  |  |
| 7. | Reviewed and approved by Curriculum Committee |  |  |
| 8. | Reviewed and approved by Academic Senate |  |  |
| 9. | Reviewed and approved by Provost/designee |  |  |

LCC provides equal opportunity for all persons and prohibits discriminatory practices based on race, color, sex, age, religion, national origin, creed, ancestry, height, weight, sexual orientation, gender identity, gender expression, disability, familial status, marital status, military status, veteran’s status, or other status as protected by law, or genetic information that is unrelated to the person’s ability to perform the duties of a particular job or position or participate in educational programs, courses, services or activities offered by the College.

The following individuals have been designated to handle inquiries regarding the nondiscrimination policies: Equal Opportunity Officer, Washington Court Place, 309 N. Washington Square Lansing, MI 48933, 517-483-1730; Employee Coordinator 504/ADA, Administration Building, 610 N. Capitol Ave. Lansing, MI 48933, 517-483-1875; Student Coordinator 504/ADA, Gannon Building, 411 N. Grand Ave. Lansing, MI 48933, 517-483-1885; Human Resource Manager/Employee Title IX Coordinator, Administration Building, 610 N. Capitol Ave. Lansing, MI 48933, 517-483-1879; Student Title IX Coordinator, Gannon Building, 411 N. Grand Ave. Lansing, MI 48933, 517-483-9632.