

SPRING 2021

UNDERGRADUATE PROGRAM TRANSMITTAL FORM

KEAN UNIVERSITY: THE UNIVERSITY SENATE

Must be submitted to the Senate Office in Electronic Format as Required

Contact Person: _____ Phone: _____ Email: _____

School Department / Program: _____

This is the original PROGRAM proposal This is a revision Revision No. _____

Full Title of Program: _____

Previous Title (if appropriate): _____ N/A

Abbreviated Title (30 characters or less): _____

Proposed Date of Implementation: _____

PROPOSED ACTION

APPROVAL OF

- Approval of New Program
- New Option in Program
- New Minor in Program
- New Certification Program
- New Non-Degree Program
- Special Offering
- Other Action*

REVISION OF

- Major Program
- Option in Program
- Minor Program
- Collateral Program
- Certification Program
- Non-Degree Program
- Special Offering

DISCONTINUATION OF

- Major Program
- Option in Program
- Minor Program
- Collateral Program
- Certification Program
- Non-Degree Program

(*Specify, e.g. conversion of degree designation; conversion of option to major program)

ACTION AND SIGNATURES

Affected School / Department Program Signatures on p. 2 (Requires Chairs Signature only) Yes No

School / Departmental / Program Action

(Complete p. 2 if approval by more than one School / Department / Program is required)

School / Department / Program: _____

School / Department Program Approval Yes No

Vote Total: _____ YES _____ NO _____ Absent

School / Department / Program Curriculum Chair _____ Date: _____

Department Chairperson, Program Coordinator or Executive Director: _____

Signature: _____ Date: _____

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KEAN UNIVERSITY: THE UNIVERSITY SENATE

Dean’s Action (complete p. 3 if receipt by more than one Dean is required)

College Dean’s Receipt: _____ Date: _____

GE Committee Chairperson _____ Date: _____

UCC Chairperson _____ Date: _____

UNIVERSITY SENATE ACTION

Approved by University Senate (if required) YES NO Approval Date: _____

University Senate Chairperson _____ Approval Date: _____

Presidential Approval _____ Approval Date: _____

Approved by Board of Trustees (if appropriate) YES NO Approval Date: _____

Chairperson of the Board of Trustees _____ Approval Date: _____

Completed and approved course document received by Senate Office _____ Date: _____

To be completed and attached only if the approval process involves or affects more than one School / Department / Program and / or college

School / Departmental / Program Action (continued from page one)

School / Department / Program: _____

School / Department Program Approval Yes No

Vote Total: _____ YES _____ NO _____ Absent

School / Department / Program Curriculum Chair _____ Date: _____

Department Chairperson, Program Coordinator or Executive Director: _____

Signature: _____ Date: _____

School / Department / Program: _____

School / Department Program Approval Yes No

Vote Total: _____ YES _____ NO _____ Absent

School / Department / Program Curriculum Chair _____ Date: _____

Department Chairperson, Program Coordinator or Executive Director: _____

Signature: _____ Date: _____

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KEAN UNIVERSITY: THE UNIVERSITY SENATE

Dean's Action (continued from Page One)

2nd College Dean's Receipt (signature) _____ Date: _____

3rd College Dean's Receipt (signature) _____ Date: _____

4th College Dean's Receipt (signature) _____ Date: _____

If more than one Dean's signature is required, these signatures must be obtained before submission to the University Senate Office for final distribution