**New Academic Certificate Program Template**

If you need assistance to complete this form prior to submission, please contact Dr. Serenity Rose King, Associate Vice President for Institutional Success and Decision Support by email: serenity.king@utdallas.edu or by phone, 972.883.6749.

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| **OVERVIEW** |
| **Primary Contact**  |       |
| **Administrative Unit Name** (e.g., School or Department Name) |       |
| **Proposed Academic Certificate Program Title** |       |
| **Desired Implementation Date(s)**  |       |
| **Has the School Dean informed the Provost regarding the proposed academic certificate?** | [ ]  Yes[ ]  No*If no, need to discuss with the Provost’s pre-approval prior to completing this form.*  |
| **Need to hire new faculty for the program?**  | [ ]  Yes  [ ]  [ ]  No*If yes, need to obtain the Provost’s pre-approval prior to completing this form.*  |

| **PROPOSED CERTIFICATE DESCRIPTIONS** |
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| **Certificate Level** | [ ]  Undergraduate [ ]  Graduate  |
| **CIP Code***Office of Institutional Success and Decision Support (OISDS) staff will assist the school/program faculty to assign the appropriate CIP code.* |       |
| **CIP Code Program Name** |       |
| **Semester Credit Hours (SCH)** *The typical range for an academic certificate is 9 to 15 SCH.*  |      Will the SCH be out of range, e.g. 6 SCH or 18 SCH? [ ]  Yes[ ]  NoIf *yes*, please provide a rationale.       |
| **Time to Complete Academic Certificate**  |        |
| **Will this certificate be embedded into an existing degree program or stand-alone or both?** ***See*** [***UTDPP1120***](https://policy.utdallas.edu/utdpp1120) ***Academic Credentials Policy for definitions.*** | [ ]  Embedded into an existing degree program(s), i.e., the certificate courses will be part of the degree curriculum allowing students to earn the certificate prior to earning the degree.[ ]  List the relevant degree program(s)      [ ]  Stand-alone [ ]  Degree-seeking students [ ]  Non-degree seeking students [ ]  Both Embedded and Stand-aloneComplete the information above for embedded and stand-alone data.  |

| **RATIONALES FOR OFFERING PROPOSED CERTIFICATE** |
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| **Provide description and rationale for offering the Proposed Academic Certificate.** |       |
| **Describe the focus for Proposed Academic Certificate.** |        |
| **Describe Job Market for the Proposed Academic Certificate.** |       |

| **OPERATIONS**  |
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| **Select the appropriate funding model** | [ ]  State-Supported[ ]  Self-Supporting/Non-formula funding (Cohort or Executive Education) [ ]  Cohort [ ]  Executive Education[ ]  Both State-Supported and Self-Supporting  |
| **Program Costs / Expenses as expected** |       |
| **Revenue (fees) as expected** |       |
| **List the approximate student to faculty ratio and the student to advisor ratio.** (ratio should be no more than 250 total students per advisor. | Expected Students:      Advisors Needed:       |
| **Need to hire new advisors** | [ ]  Yes [ ]  No |
| **Need to hire new staff besides advisors** | [ ]  Yes [ ]  NoIf *yes*, please explain:       |
| **Additional workload impact on existing staff, i.e., Office of Admission and Enrollment and/or Office of Graduate Education for application set up, etc.** | Please explain:       |
| **Provide an Assessment Plan?** | [ ]  Please reach out to Dr. Gloria Shenoy, gloria@utdallas.edu, to create student learning outcomes and provide a required assessment plan for the proposed academic certificate program.Download: [Certificate Program Assessment Plan](https://go.utdallas.edu/cert-assessment-plan)  |

| **ENROLLMENT / ADMISSION: UT DALLAS AND NON-UT DALLAS STUDENTS**  |
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| **Enrollment Type** | [ ]  UT Dallas Students[ ]  Non-UT Dallas [ ]  Both UT Dallas Students and Non-UT Dallas  |
| **Admission Criteria.****Select type and describe criteria for each type of student** |       |
| **Select Modality** | [ ]  Modality: [ ]  In-person [ ]  Hybrid[ ]  100% Online |
| **Select and Identify Course**  | Identify new courses with an asterisk; the percentage of new course content may require SACSCOC notification/approval,  |
| **Does the course(s) have additional prerequisites not included within the academic certificate program?** | [ ]  Yes [ ]  NoIf *yes – see the next two questions:*1. Please explain how UT Dallas students outside of the school’s existing majors will meet these additional prerequisites without exceeding the SCH for timely completion.
2. Please explain how non-degree seeking students could meet these same prerequisites if the academic certificate is offered as a stand-alone certificate:
 |
| **Assign Faculty to each course:** |  |
| **Complete the Enrollment Projections table for the Proposed Academic Certificate**  | Complete the Enrollment Projections table to show the estimated cumulative headcount and full-time student equivalent (FTSE) enrollment for the first five years of the proposed program. Include summer enrollments, if relevant, in the same year as fall enrollments. Subtract students as necessary for projected graduations or attrition. Provide explanations of how headcounts, FTSE numbers, and attrition were determined. Define full-time and part-time status.  |

***Enrollment Projections Table for the Proposed Academic Certificate***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| **Total New Students** |  |  |  |  |  |
| Attrition |  |  |  |  |  |
| **Cumulative Headcount**  |  |  |  |  |  |
| FTSE |  |  |  |  |  |
| Graduates |  |  |  |  |  |

| **DELIVERY MODALITY**  |
| --- |
| **Select Modality** | Identify the modalities in which the student will be able to fully complete the program: (select all that apply): [ ]  In-person [ ]  Hybrid[ ]  100% Online  |
| **Offer at an Off-Campus Location?**  | [ ]  Yes [ ]  No |
| **If the program is offered at an off-campus location, identify existing site location or provide the address of the new proposed off-campus site.**  | [ ]  Existing / Approved Off-Campus Site Locations [ ]  City of Dallas, City Hall [ ]  Collin Higher Education Center[ ]  Plano Municipal Center  [ ]  Collin College Technical Campus [OISDS will provide consultation regarding fee model]If it is a new off-campus location, it will require SACSCOC approval prior to implementation. Please provide off-campus site address below.[ ]  Academic. Site Locations:      [ ]  Non-academic. Site Locations:       |