**Degree or Certificate Program Name Change**

 **or Degree Code Change**

Note: Required attachments & approvals for request are listed below.

Institution: *The University of Texas at Dallas*

Degree Level:

Degree Code Abbreviation (e.g. MA):

Degree Full Code Description *(e.g. Master of Arts):*

Degree Program Name / Title (e.g. Psychology):

*Or Certificate Program Name/Title:*

Degree Program CIP Code[[1]](#footnote-2):

 *Or Certificate Program CIP Code:*

CIP Code Name:

Administrative Unit Name [e.g., School or Department Name] & Number [OISDS will provide the THECB number]:

Proposed Effective Date of Change:

Does the program need phase out date(s) to allow previously enrolled students to graduate under the existing program name? [ ]  Yes [ ]  No

*If “funding change” or “other” request*

Does the proposed change affect a doctoral or professional degree program that was approved by the Board at a THECB quarterly meeting after September 1, 2023**?** **[ ]  Yes** **[ ]  No**

**Required Contact Info and Approvals for Request**

* Submitter Contact: Dr. Serenity Rose King, serenity.king@utdallas.edu, *972-883-6749*
* Proposal Contact’s *name, email, phone*:
* CAO/Designee Approval Contact: Dr. Inga H. Musselman, Inga.Musselman@utdallas.edu*, 972-883-2271*

Note: The submitter will certify that all appropriate approvals have been collected, and the submitter contact and proposal contact and will receive a copy of the proposal upon submission.

Additional Fields for Degree or Certificate Program Name Change

or Degree Code Change

New degree (certificate) program name (if applicable):

New degree code (if applicable):

Please provide a brief summary of the rationale for the program name and/or degree code change request, including any curricular or discipline-based changes.

1. The Office of Institutional Success and Decision Support (OISDS) staff will assist the school/program faculty to assign the CIP code. [↑](#footnote-ref-2)