ATTACHMENT 3A-1

LETTER OF NOTIFICATION – 5 DELETION

(Certificate, Degree, Option, Organizational Unit)

1.	Institution submitting request: The University of Arkansas
2.	Contact person/title: Dr. Sharon Gaber, Provost and Vice Chancellor for Academic Affairs, ADMN 422, University of Arkansas, Fayetteville, AR 72701
3.	Phone number/e-mail address: Dr. Sharon Gaber (479) 575-5459 / sgaber@uark.edu
4.	Proposed effective date: Fall Semester 2011
5.	Title of certificate, degree program, option, or organizational unit: Recreation Management Concentration under the M.Ed. in Recreation and Sport Management
6.	CIP Code: 31.0301
7.	Degree Code: 5830
8.	Reason for deletion: Concentration is being combined into the newly modified M.Ed. Recreation and Sport Management degree program.
9.	Number of students still enrolled in program: Three
10	Expected graduation date of last student: May 2012
11	. Name of courses which will be deleted as a result of this action: None
12	How will students in the deleted program be accommodated: Current students in the concentration will be allowed to either stay in the existing concentration or switch to the new modified program of study under the M.Ed. in Recreation and Sport Management.
13	s. Are funds available for reallocation? No
Вс	pard of Trustees Approval Date:
Ch	nief Academic Officer: Date: