ATTACHMENT 3D-1

LETTER OF NOTIFICATION – 1

NAME CHANGE OF EXISTING CERTIFICATE, DEGREE, MAJOR, OPTION OR ORGANIZATIONAL UNIT

(No change in curriculum, emphasis, or organizational structure)

- 1. Institution submitting request: The University of Arkansas
- 2. Contact person/title: Sharon Gaber, Provost and Vice Chancellor for Academic Affairs, ADMN 422, University of Arkansas, Fayetteville, AR 72701
- Phone number/e-mail address: (479)<u>575-5459/sgaber@uark.edu</u>
- 4. Proposed effective date: Fall Semester 2011
- 5. Current title of degree/certificate program: M.S. in Health Science
- 6. Current title of major or option: **NA**
- 7. Current title of organizational unit: NA
- 8. Proposed name of certificate/degree: M.S. in Community Health Promotion
- 9. Proposed name of major or option: NA
- 10.Proposed name of organizational unit: **NA**
- 11.CIP Code: 51.1504
- 12.Degree Code: 6270
- 13. Reason for proposed action:

The name "Community Health Promotion" is more representative of what is currently being taught in this curriculum. The current curriculum prepares students for jobs in the area of community health promotion and not in the area of health science.

President/Chancellor Approval Date:

Board of Trustees Notification Date:

Chief Academic Officer:

Date: