

Letter of Notification

A Letter of Notification is required for programmatic and organizational changes that do not require prior review by the Coordinating Board unless requested. The Letter of Notification with supporting documentation must be submitted to ADHE by the established deadlines. All changes in existing programs/units or requests for new programs/units may be approved by the ADHE Director for immediate implementation and must be included on the agenda of the next scheduled Coordinating Board meeting. This form sets forth the relevant criteria and compliance procedures for institutions submitting letters of notification.

New or Existing Program	Modification					
☐Title or CIP change	☐Joint Bachelo	r/Master's degree	e (3+1 or 4+1 Program)			
☐ Program reconfiguration-prog	ram created out	of closely allied	existing program(s) *attack	h copy of "before and after" curriculu	ım	
■Program curriculum revision	or existing progr	am offered onlin	*attach copy of "before and	d after" curriculum		
☐Establishment of administrativ	ve unit or reorga	nization of existi	ng administrative unit *at.	tach copy of "before and after" organ	iization chart	
☐ New certificate program (e.g.	certification of p	proficiency, techr	nical certificate, or gradua	ate certificate)		
Before the Pro			r the Proposed Change or New Program			
Title of Old Program/Certificate	Degree Code	CIP Code	Title of New Program/Certificate	Degree	CIP Code	
Management	3530	52.0201	Management	Bachelor of Science in Business Administration	52.0201	
Attach a copy of the "before and af	ter" curriculum,	as applicable				
Program Deletion/Inactive		Q i				
□Delete program(s)/option (s)/en	mphasis/track				<u></u> _	
□Place program on "Inactive Sta	atus" list					
□Reactivation of program from						
				<u> </u>		
Program/Certificate/Option	Degree and CIP Code		Intended Date of Deletic	Intended Date of Deletion/Inactivation MM/Y		
Establishing a New Off-Ca ☐New Off-Campus Location	ampus Locati	on				
Form Approval(s)						
Charles F. Robinson			01/05/21			
Name of Provost/Chief Academic Officer		Signature		Date	Date	
President/Chancellor Approval Date	01/19/21					
Board of Trustee Approval or Notification Date	03/18/21					
nstitution: University of Ar	kansas Favett	eville				
	Kansas, 1 ayett	evine				
Terry Martin/Ser	nior Vice Prov	(479) 575-21	.51 tı	martin@uark.edu		
Contact Person			Phone Number	Contact Email Address		
and the second		1	SHOW			
SAVE	P A	ATTACH	ATTACHMENTS			