

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 Bachelor	r/Master's degree	e (3+1 or 4+1 Program	n)		
☐ Program reconfiguration-prog	ram created out	of closely allied e	existing program(s) *at	ttach copy of "before and after	" curriculum	
☐ Program curriculum revision o	or existing progra	am offered online	*attach copy of "before	and after" curriculum		
☐Establishment of administrativ	ve unit or reorgan	nization of existir	ng administrative unit	*attach copy of "before and at	fter" organization chart	
□New certificate program (e.g.	certification of p	oroficiency, techn	ical certificate, or grad	duate certificate)		
Before the Pro	posed Change		After	the Proposed Change or N	New Program	
Title of Old Program/Certificate	Degree Code	CIP Code	Title of New Program/Certification	Degree ate	CIP C	ode
Birth through Kindergarten, Bachelor of Scie	0440	19.0701	No Change	No Chang	ge 13.12	210
Attach a copy of the "before and af	ter" curriculum, a	as applicable				
Program Deletion/Inactive or Reactivation						
□Delete program(s)/option (s)/en						
□Place program on "Inactive Sta	_					
□Reactivation of program from						
1 0						
Program/Certificate/Option	Degree a	Degree and CIP Code		Intended Date of Deletion/Inactivation MM/YY		
						_
				ly Studies) was inherited f		.
i pio			1. 13.1210 - (Early Child	lhood Education and Teac	.ning) more precisely	
Establishing a New Off-Ca	ımpus Locatio	on				
□New Off-Campus Location						
Form Approval(s)						
				40/4	10/15/01	
Terry Martin			12/1:	12/15/21		
Name of Provost/Chief Academic Off	icer		Signature		Date	
President/Chancellor Approval Date	01/04/22					
Board of Trustee Approval or						
Notification Date	3/17/22					
Institution: University of Arl	Irangas Fariatt	av:11a				
University of Afr	Kansas, Fayetti	eville				
Ketevan Mamise	ishvili, Interin	(479) 575-21	51	kmamisei@uark.edu	d	
Contact Person	Contact I	Contact Phone Number		Contact Email Address		
SAVE		TTACH	SHOW	l		
SAVE			ATTACHMENTS			