

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/Master's degree (3+1 or 4+1 Program)
- Program reconfiguration-program created out of closely allied existing program(s) **attach copy of "before and after" curriculum*
- Program curriculum revision or existing program offered online **attach copy of "before and after" curriculum*
- Establishment of administrative unit or reorganization of existing administrative unit **attach copy of "before and after" organization chart*
- New certificate program (e.g. certification of proficiency, technical certificate, or graduate certificate)

Before the Proposed Change			After the Proposed Change or New Program		
Title of Old Program/Certificate	Degree Code	CIP Code	Title of New Program/Certificate	Degree	CIP Code
			Healthcare Business Analytics	Graduate Certificate	51.2706

Attach a copy of the "before and after" curriculum, as applicable

Program Deletion/Inactive or Reactivation

- Delete program(s)/option (s)/emphasis/track
- Place program on "Inactive Status" list
- Reactivation of program from inactive status

_____ Degree and CIP Code _____ Intended Date of Deletion/Inactivation MM/YY

Reason for Proposed Action: To provide students and working professionals an introduction to the field of business analytics as related to healthcare, as a continuation of the graduate microcertificate or as an introduction to the degree.

Establishing a New Off-Campus Location

- New Off-Campus Location

Form Approval(s)

Terry Martin 12/15/21

Name of Provost/Chief Academic Officer Signature Date

President/Chancellor Approval Date 01/04/22

Board of Trustee Approval or Notification Date 03/17/22

Institution: University of Arkansas, Fayetteville

Ketevan Mamiseishvili, Interin (479) 575-2151 kmamisei@uark.edu

Contact Person/Title Contact Phone Number Contact Email Address



Please save and email this form and supporting documents to: academic.affairs@adhe.edu