

...3331343334

04/29/2024

Becky Copper Hlenz Requester Signature:

These top fiel	lds will b	oe con	pleted	by the SG	OCE office	•
Academic Year 3	[*] 23-24			SGOCE	#: *25	

Graduate Program Change Proposal

Form Procedure

To share the form with others prior to Submitting choose the Save Progress option at the bottom.

Create a PDF of the saved form go to Print and choose <u>Save as PDF</u> copy rather than print.

To access the saved form for editing or to finalize submission visit <u>forms.fitchburgstate.edu</u> to log in and view your Pending/Drafts under My Forms.

Department/Comr	mittee Information	
The main contact person for	the Graduate Curriculum Committ	tee should fill out this form.
Requestor Name:	*Becky Copper Glenz	
	,,,	
Members of the Graduate Curriculum Committee:		Ç
Department / Unit Developing	g: *Education	abla
Department Chair:	Dr. Lyndsey Benharris	* lbenharr@fitchburgstate.edu
Academic Dean :	Dr. Nancy Murray	nmurray5@fitchburgstate.edu
Program Chair	The Program Chair for this * Yes No	request is among the people listed above.
Program Informati	ion	
This proposal refers to a (che	eck all that apply): □ Certificate	e Program Teacher Licensure Program Degree Program
Does the program run on a c	cohort model? ○ Yes • No	Will additional faculty be needed, day/adjunct? c Yes • No
Briefly describe program chan	nge to the existing program as it w	vill appear in university catalog:
The current CAGS EDLM pro	gram will change to an Ed.S. prog	ram.
Population/anticipated enrolln	nent/staffing plan (i.e., Who/how r	many will program serve?)
N/A		
Rationale and expected outco		
financial aid. The Ed.S. degr degree is a regionally recogn credential will expand the po	ree is equivalent to a CAGS degree vized credential used in New Engla vitential market for the degree to in	redential and students seeking this degree can quality for e however the CAGS (Certificate of Advanced Graduate Study) nd. Changing the title of the CAGS credential to an Ed.S. ndividuals outside of New England and also provide options for ulum or other program changes required.
How does this change affect to NA	the departments Learning Outcom	nes for the program? List any changes that need to be made.
	mester will new policy/policy chan	ge begin; will change be phased in)
*Will begin Fall 2024.		
An old and new plan of study	must be included with this propos	sal (Please use template for program revision).
		isting courses, submit a Graduate Council New Course Approval form
Old Plan of Study Attached he		
New Plan of Study Attached h		there within ar outside the university
Actach any letter(s) of Suppor	rt from professional agencies or o	thers within or outside the university.
Signatures		

Academic Dean Signature:

Date

Department Chair Approval: Date		SGOCE Dean Signature:	Date
Graduate Council The Graduate Council Chair Signature indicates that the Council has discussed this proposal and has decided it should move forward.			
		Graduate Council Chair Signature	Date
		Notifications	
pproval of the President	Date	SGOCE Dean Initials	Date
		Reviewed by the Registrar:	Date