

Certificate or Major Revision/Inactivation Form

Program Title:		Effective Date Fall :
Department:		Submitter Name:
Cert Total Units Before Revision:	After:	Submitter Email:
Major Total Units Before Revision:	After:	
Program type (check all that apply): <input type="checkbox"/> Major (AA/AS) <input type="checkbox"/> Associate Degree for Transfer (AA-T/AS-T) <input type="checkbox"/> Certificate		

PROGRAM CHANGES (Check all that apply):		
<input type="checkbox"/>	Add Elective(s)	<ul style="list-style-type: none"> List course prefix/number(s) under Rationale. Include a revised Recommended Course Sequence If adding a course, identify the Program SLO(s) that the course aligns with
<input type="checkbox"/>	Delete Elective(s)	
<input type="checkbox"/>	Add Required Course(s)	
<input type="checkbox"/>	Delete Required Course(s)	
<input type="checkbox"/>	Increase in units	<ul style="list-style-type: none"> Skills Certificate: If units reach ≥ 16, then New Program Proposal required Certificate of Achievement: <ul style="list-style-type: none"> If units reach ≤ 16, may impact student's financial aid eligibility If units reach < 8, becomes Skills Certificate (Ineligible for Chancellor's Office approval)
<input type="checkbox"/>	Decrease in units	
<input type="checkbox"/>	NEW Program Title:	
<input type="checkbox"/>	INACTIVATE CERTIFICATE/MAJOR (<i>No new students will be allowed to select the program; however, students with catalog rights may receive the award.</i>)	
<input type="checkbox"/>	Other- Please specify below under Rationale	

RATIONALE

Provide a brief explanation of what changes are being made to the certificate/major and **why**. For more complex changes, include a copy of the [web layout](#) showing exactly where the course changes are to be made.

SUBMIT

1) Submit all documents to Curriculum Technician, [Chas Crocker](#)

Submitted by: _____ Date: _____

Department chair: _____ Date: _____

Dean/Director: _____ Date: _____