



Program Notification

Name of Institution:	
List All Virginia Campuses Where Program will be Offered	
Program Title:	
Classification of Instructional Program (CIP) Code: (http://nces.ed.gov/ipeds/cipcode/search.aspx?y=55)	

Credentials Issued:

Program Type (Check One)

<input type="checkbox"/> Diploma	<input type="checkbox"/> Associate of Science (A.S)
<input type="checkbox"/> Certificate	<input type="checkbox"/> Bachelors of Arts (B.A)
<input type="checkbox"/> Associate of Applied Science (A.A.S.)	<input type="checkbox"/> Bachelor of Science (B.S.)
<input type="checkbox"/> Associate of Occupational Science (A.O.S)	<input type="checkbox"/> Master of Arts (M.A.)
<input type="checkbox"/> Associate of Arts (A.A)	<input type="checkbox"/> Master of Science (M.S.)
<input type="checkbox"/> Other:	<input type="checkbox"/> Doctor of Philosophy (Ph.D)

Program Completion Time:

Months :		Weeks:	
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Program Length

Total Instructional Hours

Program Cost

Clock Hours <input type="checkbox"/>	# of Hours	Class Hours:	Tuition:
Credit Hours <input type="checkbox"/>		Lab Hours:	Registration Fee:
[Patterned Area]		Externship/Clinical Hours:	Books and Materials:
		Total Hours	Other Costs:
Anticipated Effective Date:			Total Program Cost

Program Objective/Description: Provide anticipated student learning outcomes. (include a statement demonstrating that the proposed program is consistent with the school's stated purpose)

For Programs Requiring Externship/Clinical Experiences:

If the program requires students to complete an externship/clinical experience, attach copies of agreements between the school and all clinical sites.

Program Breakdown by Course *(attach additional sheet if needed to include all courses offered in program) Unaccredited institutions must submit course descriptions.*

Course Number	Course Title	Course Length	Hours
			Credit Hours <input type="checkbox"/> Clock Hours <input type="checkbox"/>
			Credit Hours <input type="checkbox"/> Clock Hours <input type="checkbox"/>
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			Credit Hours <input type="checkbox"/> Clock Hours <input type="checkbox"/>

Inventory of Equipment

Quantity	Equipment Item	Brief Description of Equipment

Textbooks/Learning Resources *(Please include publishers and publication dates)*

Title	Publisher	Publication Date

Market/Employment Demand

Attach description, in at least 200 words, of the market/employment demands for the proposed program. Include possible position titles for which graduates would qualify and current classified ads (no less than five) for such positions. Provide employment projections from the Bureau of Labor Statistics and the Virginia Employment Commission to demonstrate future employment demands.

For Career/Technical Schools Only

Attach evidence that course of study conforms to state, federal, trade, or manufacturing standards of training for the occupational field.