|  |
| --- |
| For Academic Affairs and Research Use Only |
| Proposal Number: |  |
| CIP Code:  |  |
| Degree Code: |  |

**EXISTING CERTIFICATE or DEGREE PROGRAM**

**OFFERED AT OFF-CAMPUS LOCATION FORM**

**[X] Undergraduate Curriculum Council**

**[ ] Graduate Council**

Signed paper copies of proposals submitted for consideration are no longer required. Please type approver name and enter date of approval.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|

|  |  |
| --- | --- |
| David Kern | 3/12/2020 |

**Department Curriculum Committee Chair** |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**COPE Chair (if applicable)** |
|

|  |  |
| --- | --- |
| Patricia Robertson | 3/12/2020 |

**Department Chair** |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**Head of Unit (if applicable)**   |
|

|  |  |
| --- | --- |
| John Seydel | 3/20/2020 |

**College Curriculum Committee Chair** |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**Undergraduate Curriculum Council Chair** |
|

|  |  |
| --- | --- |
|  Jim Washam | 3/20/2020 |

**College Dean** |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**Graduate Curriculum Committee Chair** |
|

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**General Education Committee Chair (if applicable)**   |

|  |  |
| --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Enter date |

**Vice Chancellor for Academic Affairs** |

1. **Contact Person** (Name, Email Address, Phone Number)

Dr. Patricia Robertson, probertson@astate.edu, 870-972-2300

1. **Name of existing program**.

B.A. in Economics

1. **Proposed effective date:**

Fall 2020

1. **Proposed location of off-campus site.**

Arkansas State University Campus Querétaro (ASU-Q)

1. **Reason for offering proposed program at off-campus site**.

To provide A-State’s B.A. Economics degree to student who are enrolled at ASU-Q

1. **Identify courses and/or degrees to be offered at the proposed site.**

|  |
| --- |
| ***B.A. Economics Degree*** |
| ***Course No.*** | ***Course Name*** | ***Credits*** |
| *BUSN 1003* | *First Year Experience – Business* | *3* |
| *ENG 1003* | *Composition I* | *3* |
| *ENG 1013* | *Composition II* | *3* |
| *COMS 1203* | *Oral Communication* | *3* |
| *MATH 1023* | *College Algebra* | *3* |
| *LIFE* | *Life Science Gen Ed Elective* | *4* |
| *PHYS* | *Physical Science Gen Ed Elective* | *4* |
| *SOC 2213* | *Introduction to Sociology* | *3* |
| *ECON 2313* | *Principles of Macroeconomics* | *3* |
| *HIST/GOVT* | *US History or US Government Gen Ed Elective* | *3* |
| *ART* | *Fine Arts Gen Ed Elective* | *3* |
| *HUM* | *Humanities Gen Ed Elective* | *3* |
| *FOREIGN* | *Foreign Language Requirement* | *12* |
| *CIT 3013* | *Management Information Systems* | *3* |
| *ECON 2323* | *Principles of Microeconomics* | *3* |
| *ECON 3313* | *Microeconomic Analysis* | *3* |
| *ECON 3323* | *Money and Banking* | *3* |
| *ECON 3353* | *Macroeconomic Analysis* | *3* |
| *ECON ELEC* | *Upper-Level Economics Elective Options* | *12* |
| *HIST ELEC* | *Upper-Level History Elective Option* | *3* |
| *POSC ELEC* | *Upper-Level Political Science Elective Option* | *6* |
| *SOC ELEC* | *Upper-Level Sociology Elective Option* | *3* |
| *ELEC* | *Electives* | *31* |
|  |  |  |
| *Total* |  | *120* |

1. **Will students be able to complete all program requirements at this location? If not, where?**

Yes

1. **Institutional curriculum committee review/approval date:**

Enter text...

1. **Provide a list of services that will be supplied by consortia partners or outsourced to another organization (faculty/instructional support, course materials, course management and delivery, library-related services, bookstore services, services providing information to students, technical services, administrative services, online payment arrangements, student privacy consideration, services related to orientation, advising, counseling or tutoring, etc.) Include the draft contract/Memorandum of Understanding (MOU) for each partner/organization offering faculty/instructional support for the program.**

N/A

1. **Provide written notification to accrediting body or licensing agency of your intention to offer program at an off-campus location and their written response to you, if applicable.**

Academic Affairs will provide

President/Chancellor Approval Date:

Board of Trustees Notification Date:

Chief Academic Officer: Date: