

Curriculum Change Form
(Present only one proposed curriculum change per form)
(Complete only the section(s) applicable.)

Part I

(Check one) <input type="checkbox"/> New Course (Parts II, IV) <input type="checkbox"/> Course Revision (Parts II, IV) <input type="checkbox"/> Course Dropped (Part II) <input type="checkbox"/> New Program (Part III) <input type="checkbox"/> Program Revision (Part III) <input checked="" type="checkbox"/> Program Suspended (Part III)	Department Name Health Promotion and Administration <hr/> College Health Sciences <hr/> *Course Prefix & Number <hr/> *Course Title (30 characters) <hr/> *Program Title Medical Administrative Certificate Program (Major __, Option __; Minor __; or Certificate <u>X</u>) <hr/> *Provide only the information relevant to the proposal.	
Proposal Approved by:		
	<u>Date</u>	<u>Date</u>
Departmental Committee	4-18-2007	Graduate Council* NA
<i>Is this a SACS Substantive Change?</i> Yes**** <input type="checkbox"/> No <input checked="" type="checkbox"/>		
College Curriculum Committee	9/5/07	Council on Academic Affairs Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> 09/20/07
General Education Committee*	NA	Faculty Senate**
Teacher Education Committee*	NA	Board of Regents**
		Council on Postsecondary Edu.*** NA
*If Applicable (Type NA if not applicable.) **Approval needed for new, revised, or suspended programs ***Approval/Posting needed for new degree program or certificate program ****If "yes", SACS must be notified before implementation. Please contact EKU's Office of Institutional Effectiveness.		

Completion of A, B, and C is required: (Please be specific, but concise.)

A. 1. Specific action requested: SUSPEND CERTIFICATE	
A. 2. Effective date: Spring 2008	
B. The justification for this action: Not enough students pursue this certificate so it is being Suspended	
C. The projected cost (or savings) of this proposal is as follows: Personnel Impact: NONE Operating Expenses Impact: NONE Equipment/Physical Facility Needs: NONE Library Resources: NONE	

Part III. Recording Data for New, Revised, or Suspended Program

New or Revised* Program Text (*Use strikethrough for deletions and <u>underlines</u> for additions.) MEDICAL ADMINISTRATIVE CERTIFICATE PROGRAM
Major Requirements..... 10 hrs MAS 100³, 355³, 360⁴.
Supporting Requirements..... 9 hrs CIS 212³. CHSMAS 200³, 201³;
Total Curriculum Requirements..... 19 hrs

*CHS200,201 ARE NOW MAS200,201 HOWEVER THE CERTIFICATE WILL BE DROPPED EFF. SPRING OF 2008
 These changes of making this a "suspend Cert" in place of the original program revision were made by the dept. per Joy Renfro prior to the College Curriculum Meeting so the form was AMENDED to SUSPEND prior to the meeting. JKR 9/4/07*