**College of Graduate Studies and Research**

**Graduate Level Certificate Proposal**

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| --- | --- | --- | --- |
| Name of certificate |  | | |
| Type of certificate | \_\_\_ Post-baccalaureate  \_\_\_ Graduate  \_\_\_ Post-professional  \_\_\_ Certificate of Advanced Graduate Study | | |
| Department, School or College |  | | |
| Primary Contact Person:  Name  Email  Phone |  | | |
| CIP code |  | | |
| Initiation date: semester/year |  | | |
| Description for catalog |  | | |
| # Credit Hours |  | | |
| Full-time/ part-time or both | \_\_\_ Full-time only  \_\_\_ Part-time only  \_\_\_ Both | | |
| Participating Departments | Primary |  |
| Supporting |  | |
| Delivery: check all that apply | \_\_\_ Face-to-Face  \_\_\_ Online  \_\_\_Hybrid (mix of face-to-face and online) | | |
| Campus(es) for F2F and hybrid: |  | | |
| Expected enrollments by year | Initiation year \_\_\_\_\_\_\_  Second year \_\_\_\_\_\_\_  Sustained \_\_\_\_\_\_\_ | | |
| Consultation with SCHEV liaison | Date: | | |
| Consultation with SACS liaison | Date: | | |
| Attach SCHEV certificate program proposal and cover sheet |  | | |

Approval/recommendation pathway:

Department Curriculum Committee (if for one discipline)

College Curriculum Committee

College Dean

Academic Course and Program Review

Graduate Affairs Council

Faculty Senate (recommendation)

Provost

SCHEV

Instructions:

* Select a name for the certificate that communicates the purpose of the certificate.
* Select the type of certificate based on [SCHEV definitions](http://www.schev.edu/docs/default-source/institution-section/GuidancePolicy/academic-program-forms/certificateprogramdefinitions-1.pdf).
* Select the most appropriate CIP code for this field of study from [IPEDS](https://nces.ed.gov/ipeds/cipcode/default.aspx?y=55). The CIP code can the same as for another degree program in the same field.
* Indicate if students will be expected to enroll only full-time, only part-time or if both options are available to students.
* Indicate if the program will be offered face-to-face, even if some students are participating via videoconferencing technology (e.g., Zoom), Online, and/or Hybrid. More than one delivery method is possible.
* If the program includes face-to-face instruction, indicate which campus(es) the program will be offered: Radford main campus, Carilion Roanoke, Roanoke Higher Education Center, Southwest Higher Education Center in Abingdon or name of another site.
* Project future enrollments. How many students expected in the first class? How many once a second class commences? How many total in the program to be sustained on an annual basis once fully enrolled?
* The current SCHEV liaison is George Santopietro, Assistant Provost for Academic Operations, [gsantopi@radford.edu](mailto:gsantopi@radford.edu) x5460.
* The current SACS liaison is Sandra Baker, Director of the Office of Institutional Effectiveness and Quality Improvement, sbaker10@radford.edu x5792.
* Complete the SCHEV certificate proposal based on the [SCHEV Certificate template](http://www.schev.edu/docs/default-source/institution-section/GuidancePolicy/academic-program-forms/guide-document-certificate-program-template-2.pdf) and the current [SCHEV proposal cover sheet](http://www.schev.edu/index/institutional/guidance-policies/academic-affairs-policy/approval-of-program-actions).
* Attach graduate proposal signature page.