**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 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.