**SUBSTANTIVE CHANGE/PROGRAM MODIFICATION**

***Curricular Change to an Existing Program***

Institution:

Institutional Contact (President or Vice President for Academic Affairs):

Date:

School/Division:

Department:

Degree Name:

Major:

CIP Code:

Anticipated Start Date for Curricular Changes:

Rationale for Curriculum Modification:

Curriculum Comparison:

|  |  |
| --- | --- |
| Current Program of Study | Proposed Program of Study |
|  |  |

***Note: The completed form is to be submitted using the sharepoint tool and website under the auspices of the Vice President for Academic Affairs (submission url:*** [***https://sharepoint.bor.usg.edu/team\_sites/academicaffairs/SitePages/Home.aspx***](https://sharepoint.bor.usg.edu/team_sites/academicaffairs/SitePages/Home.aspx)***)***