Request to

Add New Partner to Certificate Program



[PROPOSING CLU(S)]

[PROPOSING SCHOOL(S)]

[PROPOSING DEPARTMENT(S)]

[DATE]

The evolution of academic programs at Rutgers is critical to the university and the needs of students, faculty, and the citizens of the State of New Jersey.  The Office of University Academic Affairs supports this through a university-wide *Academic Program Approval Process* ensuring appropriate input, accountability, and decision-making at multiple levels to promote:

* Academic excellence;
* Optimal impact on the Rutgers’ community and broader statewide citizenry;
* Alignment with strategic academic priorities;
* Commitment to educational access, diversity, equity, and inclusion; and
* Effective and strategic use of university resources.

**Request Form to**

**Add New Partner to Certificate Program**

During the initial stages of a request to add a new partner to an existing certificate program, chancellors or their designee must complete an institutional [Notice of Intent (NOI)](https://oirap.rutgers.edu/NOI-ProgramChanges/login.aspx) once preliminary approval has been granted for the proposed request to move forward.

Adding a new partner to an existing certificate program requires initial approval from the requesting academic unit’s Faculty, Department Chair, Dean, and Chancellor or Provost. Following these approvals, requests to add a new partner to an existing certificate program must be reviewed by the Office of Academic Planning and approved by the Executive Vice President for Academic Affairs (EVPAA). Requests to add a new partner to an existing certificate program are submitted as information items to the Board of Governors (including the Committee on Academic and Student Affairs).

Units seeking to add a new partner to a certificate program should provide complete responses to the items in **bold text** below and submit the information to the Office of Academic Planning (academicplanning@oq.rutgers.edu). Please contact the Office of Academic Planning if you have any questions.

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| **Chancellor-Led Unit (CLU)** | Enter the name of the sponsoring CLU(s) – Camden, Newark, New Brunswick, and/or Rutgers Biomedical and Health Sciences. |
| **School/College** | Enter the name of the sponsoring school(s) or college(s). |
| **Department** | Enter the name of the sponsoring department(s), if applicable. |
| **Proposed Initiation Date** | Enter the proposed semester and year in which the program intends to initiate this change. |
| **Name of Proposed New Partner** | Enter the name of the new partner to the program. |
| **Primary Contact (Name)** | Enter the name of the primary contact in the proposing unit responsible for coordinating the requested change. |
| **Primary Contact (E-mail)** | Enter the e-mail address of the primary contact in the proposing unit responsible for coordinating the requested change. |
| **Primary Contact (Telephone)** | Enter the telephone number of the primary contact in the proposing unit responsible for coordinating the requested change. |
| **Date of Submission** | Enter the date you are submitting this request. |

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| **Provide a history and description of the current program and partnerships involved.** |
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| **Indicate the reason for the new partnership.** |
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| **Describe the role of each institution in delivering the program.** |
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| **List the approximate number of students expected to enroll through the new partnership.** |
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| **Responses to comments from CLUs**As noted above, during the initial stages of this request, chancellors/provosts must complete a Notice of Intent (NOI). Upon submission, the NOI initiated a 30-day comment period during which chancellors’ offices may submit comments/feedback to the requesting unit. The requesting unit should attach any comments received from CLUs as well as responses to those comments. If no comments were received, please enter “N/A.” |
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**Signatures of Approval Date**

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Department Chair

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Dean

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Chancellor or Provost

There may be cases where mitigating circumstances require additional or alternate approvals. For questions, contact academicplanning@oq.rutgers.edu.

**For Office Use Only:**

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| **Review by the Office of University Academic Affairs:** |
| Review Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Approval/acceptance by EVPAA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_BOG submission/approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Submitted to OSHE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |