

Appendix B
New Program Proposal Resources Form

Program Name: _____

Office of Undergraduate Studies: (Undergraduate Programs Only)

COMMENT:

Print Name and Title

Signature

Date

Office of Academic Affairs:

COMMENT:

Print Name and Title

Signature

Date

Office of Licensure and State Regulations

COMMENT:

Print Name and Title

Signature

Date

Office of Information Technology (computing services and media)

COMMENT:

Print Name and Title

Signature

Date

Office of Vice President for Information Services/University Librarian

COMMENT:

Print Name and Title

Signature

Date

Office of Vice President for Finance

COMMENT:

Print Name and Title

Signature

Date

Office of Vice President for Facilities Management

COMMENT:

Print Name and Title

Signature

Date

Office of Vice President for Financial Aid and Academic Records

COMMENT:

Print Name and Title

Signature

Date