

**OFFICE OF ACADEMIC AFFAIRS
PROGRAM APPROVAL FORM**



Undergraduate Graduate New Program Program Change

College: Education

Department: Kinesiology

Program Title: Sports Coaching and Athletic Performance

Program Type: Major Minor Concentration Certificate

Total Credit Hours: 20

Effective Date: Fall 2017

Is the new program or change in existing program part of an accreditation requirement? *If so, please explain.* Yes No

Does this course involve academic units external to the originating college? *If so, deans of all colleges involved must sign this form.* Yes No

Attach a detailed description of proposed program to include the following: background information, academic justification, student need and demand, listing of courses with credit hour requirements or deletions, facility requirements, and any other pertinent information.

Department Chair: Beth N. Quick
Digitally signed by Beth Quick
Date: 2017.01.17 11:33:57 -06'00'

Grad. Council: _____

College Dean: Beth N. Quick
Digitally signed by Beth Quick
Date: 2017.01.17 11:34:20 -06'00'

Graduate Dean: _____

College Curriculum Committee: Dennis M. [Signature]

Undergrad Curriculum Cmte: _____

Provost: _____

Acknowledgements from other units:

Department Chair: _____

College Dean: _____

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