

## CHANGE MASTERS DEGREE PROGRAM FORM

### 1. GENERAL INFORMATION

College:	Gatton College of Business & Economics	Department:	MBA Program
Current Major Name:	Master of Business Administration	Proposed Major Name:	
Current Degree Title:	Master of Business Administration	Proposed Degree Title:	
Formal Option(s):	Professional Evening MBA Program	Proposed Formal Option(s):	
Specialty Fields w/in Formal Option:		Proposed Specialty Fields w/in Formal Options:	
Date of Contact with Associate Provost for Academic Administration <sup>1</sup> :			
Bulletin (yr & pgs):		CIP Code <sup>1</sup> :	
		Today's Date:	
Accrediting Agency (if applicable):			
Requested Effective Date:	<input type="checkbox"/> Semester following approval.	OR	<input type="checkbox"/> Specific Date <sup>2</sup> : Fall 2016
Dept. Contact Person:	Harvie Wilkinson	Phone:	257-1924
		Email:	harviewilkinson@uky.edu

### 2. CHANGE(S) IN PROGRAM REQUIREMENTS

		<u>Current</u>	<u>Proposed</u>
1.	Number of transfer credits allowed (Maximum is Graduate School limit of 9 hours or 25% of course work)	9	
2.	Residence requirement (if applicable)		
3.	Language(s) and/or skill(s) required		
4.	Termination criteria		
5.	Plan A Degree Plan requirements <sup>3</sup> (thesis)		
6.	Plan B Degree Plan requirements <sup>3</sup> (non-thesis)	x	
7.	Distribution of course levels required (At least one-half must be at 600+ level & two-thirds must be in organized courses.)		
8.	Required courses (if applicable)	MKT 611 New Product Development	<i>MKT 601 Marketing Research</i>
9.	Required distribution of courses within program (if applicable)		

<sup>1</sup> Prior to filling out this form, you MUST contact the Associate Provost for Academic Administration (APAA). If you do not know the CIP code, the APAA can provide you with that during the contact.

<sup>2</sup> Program changes are typically made effective for the semester following approval. No changes will be made effective until all approvals are received.

<sup>3</sup> If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

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10.	Final examination requirements	x	
11.	Explain whether the proposed changes to the program (as described in sections 1 to 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u>		
12.	List any other requirements not covered above?		
13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.		
	<p>In reviewing the curriculum of the Professional Evening MBA program, the MBA Policy Committee has voted to remove MKT 611 and replace it with MKT 601 so that the curriculum is more in line with the One Year Accelerated MBA program. The proposal was submitted to the entire Gatton Faculty which supports this request for a change of the one marketing course in the Professional Evening curriculum in order to bring both programs in closer alignment.</p>		

**CHANGE MASTERS DEGREE PROGRAM FORM**  
Signature Routing Log

**General Information:**

Proposal Name: Changing the Professional Evening MBA Program Class from MKT 611 to MKT 601

Proposal Contact Person Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**INSTRUCTIONS:**

Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

**Internal College Approvals and Course Cross-listing Approvals:**

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
MBA Policy Cmte.	3/22/16	Frank Scott / 7-76491 / fscott@uky.edu	<i>Frank Scott</i>
		/ /	
MBA Program	3-22-16	Harvie Wilkinson / 71924 / harvie.wilkinson@uky.edu	<i>Harvie Wilkinson</i>
		/ /	
		/ /	

**External-to-College Approvals:**

Council	Date Approved	Signature	Approval of Revision <sup>4</sup>
Undergraduate Council			
Graduate Council	3/31/16	Roshan Nikou	
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

<sup>4</sup> Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.