PROGRAM TERMINATION FORM

Board of Governors, State University System of Florida

UNIVERSITY:	
PROGRAM NAME:	
DEGREE LEVEL(S):	
(Ph.D., Ed.D., etc)	(Classification of Instructional Programs
	ATE:
(Last date that students will be acc	epted into program)
OFFICIAL PHASE-OUT DATI	B:
(Last date that data will be submit	•

This is the form to be used for university requests to terminate doctoral degree programs and is recommended for use when terminating other programs. The request should be approved by the University Board of Trustees (UBOT) prior to submission to the Board of Governors, State University System of Florida for approval. Please fill out this form completely for each program to be terminated in order for your request to be processed as quickly as possible. Attach additional pages as necessary to provide a complete response. In the case of baccalaureate or master's degree programs, the UBOT may approve termination in accordance with BOG Regulation 8.012 (3), with notification sent to the Board of Governors, Office of Academic and Student Affairs. The issues outlined below should be examined by the UBOT in approving termination.

1. Provide a narrative rationale for the request to terminate the program.

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2.	Indicate on which campus(es) the program is being offered and the extent to which the proposed termination has had or will have an impact on enrollment, enrollment planning, and/or the reallocation of resources.
3.	Provide an explanation of the manner in which the University intends to accommodate any students or faculty who are currently active in the program scheduled to be terminated. State what steps have been taken to inform student and faculty of the intent to terminate the program?
4.	Provide data (and cite source) on the gender and racial distribution of students and faculty. For faculty also list the rank and tenure status of all affected individuals.
5.	Identify any potential negative impact of the proposed action on the current representation of females, minorities, faculty, and students.

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Signature of Requestor/Initiator	Date
Signature of Campus EO Officer	Date
Signature of College Dean	 Date
Signature of President or Vice President for Academic Affairs	Date
Date Approved by the University Board of Trustees	
Signature of Chair, Board of Trustees	 Date