

FLORIDA ATLANTIC UNIVERSITY
SACS Substantive Change Notification/Transmittal Form

SACS Procedure One or Two
Initiating or Expanding Programs (page 1 of 2)

Please review the options below, select the option that applies, and attach the required information.

- Initiating a certificate program at an employer's request
 at a new off-campus site (previously approved program)
 of significant departure from previously approved programs
- Initiating any other type of certificate program
 at a new off-campus site (previously approved program)
 of significant departure from previously approved programs
- Initiating joint degree with another institution
 SACSCOC-accredited institution
 non-SACSCOC-accredited institution
- Initiating dual degree program(s)
- Initiating off-campus sites (including Early College High School programs offered at the high school)
 Student can obtain 50-percent or more credits toward program
 Student can obtain 25-49 percent of credits toward program
- Expanding program offerings at previously approved off-campus sites
 Adding programs that are significantly different from current programs at the site
- Initiating distance learning
 Offering 50 percent or more of a program for the first time*
 Offering 25-49 percent of a program
- Initiating programs or courses offered through contractual agreement or consortium

*Adding subsequent programs requires advance notification only for programs that are significant departures from the originally approved programs.

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PROGRAM NAME: _____ **DEGREE LEVEL(S):** _____
(Certificate, Bach., Master's, Ph.D., Ed.D.)

Anticipated implementation date: _____ **Date of BOT approval:** _____

Please note, attach the required documentation (signed agreement, contact information, prospectus, letter of notification, etc.), as identified in the "Policies and Procedures for Reporting Substantive Change" at <http://www.fau.edu/sacspolicy/>. The transmittal form will be submitted by the Provost's Office to the SACS Accreditation Liaison, Office of the Vice President for Strategic Planning and Information Technology.

- 1) _____
- 2) _____
- 3) _____

Signature: University Provost (or designee)

Date

Signature: SACS Accreditation Liaison

Date

Submitted to SACS by: _____

Date: _____