

Application for Program Modification  
**UNDERGRADUATE & GRADUATE**  
University of Hawai'i at Hilo

Type of Program:

Undergraduate: \_\_\_ Major \_\_\_ Minor \_\_\_ Subject Certificate

Post Baccalaureate: \_\_\_ Program

Graduate: \_\_\_ Masters \_\_\_ Subject Certificate \_\_\_ Professional \_\_\_ Doctorate

1. College \_\_\_\_\_

Division: \_\_\_\_\_ Academic Dept: \_\_\_\_\_

2. Description of existing program as it is in the current catalog: (Attach entire description or curriculum **AND underscore all parts to be changed or deleted.**)

3. Description of modified program: Attach entire description **AND underscore all new or changed parts.**

4. Brief state of reasons for the requested modification: Attach rationale statement if space is not sufficient.

5. List other programs impacted by this change: \_\_\_\_\_

6. Program Modification of \_\_\_\_\_

---

---

\_\_\_\_\_  
Name of Submitter: (Please type)      Signature      Date: \_\_\_\_\_

\_\_\_\_\_  
Name of Department Chair or Program Director      Signature      Date: \_\_\_\_\_  
Dept Vote: \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_  
Signature of Division Chair or      Date

**Note: The Department Chair/Division Chair Forwards This Application To:**

**College Curriculum Review Committee:**      Recommended:       Not Recommended, **return to proposer:**   
Vote: \_\_\_/\_\_\_/\_\_\_

\_\_\_\_\_  
Signature of CRC Chair      Date

CRC Comments:

**College Senate or Graduate Council:** Vote:\_\_\_\_/\_\_\_\_/\_\_\_\_ Recommended:  Not Recommended, **return to CRC:**

\_\_\_\_\_  
*Signature of College Senate Chair or Graduate Division Chair*

\_\_\_\_\_  
*Date*

*Senate Comments:*

**College Dean:** Approved:  Not Approved, **return to Senate/CRC:**

\_\_\_\_\_  
*Signature of Dean*

\_\_\_\_\_  
*Date*

*Dean's Comments:*

**Note: The College Dean Forwards This Application To:**

**Campus-wide Curriculum Review Committee:** Approved:  Not Approved, **return to Dean:**

\_\_\_\_\_  
*Signature of CCRC*

\_\_\_\_\_  
*Date*

*CCRC Comments:*

**Vice Chancellor for Academic Affairs:** Approved:  Not Approved, **return to proposer:**

\_\_\_\_\_  
*Signature of VCAA*

\_\_\_\_\_  
*Date*

*VCAA Comments:*