**PROPOSAL FOR REACTIVATION OF AN ACADEMIC PROGRAM**

**Date:**

**School/College:**

**Department/Division:**

**Program (Major and Degree):**

**Which campus(es) will offer this program?**

**Proposed reactivation date:**

**Program Abstract:**

*Provide a brief summary of the program being proposed for reactivation.*

1. State the reasons for the deactivation of the program, and provide copies of any relevant documents.

2. By a comparison of previous and current conditions, identify the changes in the reasons for the deactivation of the program that now warrant its reactivation.

3. Describe the departmental commitment to the reactivation of the program.

4. Provide a list of courses and all other degree requirements for the reactivated program.

5. Document the need and the student demand for the reactivated program.

6. Identify the financial and physical resources needed for the reactivated program and verify that they will be adequate.

**Approvals:**

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 Department Head Dean of School/College Dean of Graduate School