UNIVERSITY OF WASHINTON, TACOMA

NEW UNDERGRADUATE PROGRAM REVIEW PROCESS

**PLANNING** **NOTICE OF INTENT (PNOI) COVERSHEET**

**Program Information**

Academic Unit/Division:

College/School: Enter name of school or program

Campus: [ ] Seattle [ ] Bothell [ ] Tacoma

Proposed Degree Title: Enter degree name

Proposed Degree Option(s): Enter if applicable

Proposed CIP Code: Enter CIP code

Minimum Credits Required: Enter number of credits

Proposed Start Date: Enter Quarter and Year

Length of Program: Full time Enter number Part time Enter number

Projected First Year Enrollment: Enter first year FTE

Full Enrollment by Year: Enter year with FTE of Enter FTE at full enrollment

Funding Source: [ ] State [ ]  Fee-Based (PCE) [ ] Fee-Based (non-PCE)

Proposed New Funding: Enter number

Tuition Tier (if state funding): Enter number

**Locations and Mode of Delivery** (check all that apply)

[ ]  Campus Delivery: Enter location(s)

[ ]  Off-site: Enter location(s)

[ ]  Distance Learning: Enter format(s)

[ ]  Other: Describe if applicable

Choose yes or no Program will be offered online only

Choose yes or no All coursework will correspond to the regular academic calendar

Choose yes or no Students will be able to enroll in a full-time course of study each quarter A/W/Sp

**Contact Information (Academic Department Representative)**

Name: Click here to enter text.

Title: Click here to enter text.

Address: Click here to enter text.

Telephone: Click here to enter text.

E-mail: Click here to enter text.



Endorsement by Dean Date Enter date



Endorsement by Executive Vice ChancellorDate Enter date.