UNIVERSITY OF WASHINGTON, TACOMA
NEW UNDERGRADUATE PROGRAM REVIEW PROCESS
PLANNING NOTICE OF INTENT (PNOI) COVERSHEET

Program Information
Academic Unit/Division: Enter name of school or program
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 Chancellor Date Enter date.