

Del Mar College New Program Proposal

1. Division	2. Department
3. Program Name	4. Proposed Award
5. Does this program replace an existing program? NO YES If YES, which program is proposed to be replaced?	6. Proposed Effective Date: (Semester/Year)
7. College Mission Addressed by this Program:	
8. How was the need for this program determined?	
9. Do similar programs exist at Del Mar College? At other Texas community colleges? If so, in which department, or at which college(s)?	
10. What is the projected enrollment in: Year 1 Year 2 Year 3 Year 4 Year 5	
11. How were these projections developed?	
12. What are the funding costs associated with the implementation of this program for each of the 5 years projected above? Year 1 Year 2 Year 3 Year 4 Year 5	
13. What criteria will be used to measure the progress and success of the program?	
14. What, if any, limitations might the college face in implementing this program?	
15. How will the department reach the enrollment objectives stated above?	
16. Signature of Department Chair: Date:	17. Signature of Dean: Date:
18. Signature of Curriculum Committee Chair: Date:	19. Signature of Executive VP/Chief Academic Officer: Date:

Distribution of copies by the Office of the Executive VP/CAO: (Original remains in the office of Executive VP/CAO)

Curriculum Committee website
Division Dean

Financial Aid Director
Registrar

Department Chair