A. Introduction

Except as otherwise provided, the Maine Community College System Board of Trustees retains the authority to make final decisions on program of study implementation or discontinuance upon recommendation by the MCCS President after consultation with the college presidents. The concept for a new program of study in most instances should be initiated by a college.

B. Definitions

For purposes of this policy, the following terms have the following meanings:

1. “Notification of Intent to Plan a New Instructional Program” means a statement identifying the program to be planned and explaining why the college plans to add the program.
   a. Proposed Name of the program;
   b. Reason for adding the program;
   c. Relationship to any current program(s).

2. “New Instructional Program Proposal” means a proposal that includes the following information:
   a. Description, objectives and content of program;
   b. Need justification;
   c. Admission requirements, enrollment projections and completion projections;
   d. Resource requirements; and
   e. Costs and financial support requirements.

C. Process and Procedures

1. Notice of Intent

A college president seeking to implement a new program of study shall:
a. Issue a *Notification of Intent to Plan a New Institutional Program* and forward electronically to the MCCS President, college presidents, MCCS Chief Academic Officer, and the Academic Affairs Council prior to proceeding to 1.b; and

b. Submit to the Academic Affairs Council, MCCS Chief Academic Officer, and college presidents a *New Instructional Program Proposal* for institutional review and comment.

2. **Recommendations and Approvals**

   a. The MCCS Chief Academic Officer shall recommend to the Presidents Council and MCCS President approval or denial of the new program;

   b. A program approved by the Presidents Council and the MCCS President shall be reviewed by the Education Committee of the Board of Trustees and, if approved thereby, shall be reviewed by the Board of Trustees; and

   c. The MCCS President shall issue to the MCCS Chief Academic Officer and college presidents a *Notification of Program Approval* for each program approved by the Board of Trustees.

3. **Academic Inventory**

   The MCCS Chief Academic Officer shall add to the MCCS Academic Inventory each newly approved program, and the originating college shall list the program in its college catalog.

4. **Effective Date**

   Unless otherwise noted, a newly approved program shall take effect the next academic year.

D. **Forms**

   The forms attached as A-1 (Notification of Intent to Plan a New Instructional Program) and A-2 (New Instructional Program Proposal) shall be used in the implementation of this procedure.

E. **Effective Date**

   This procedure shall take effect on July 1, 2017.

_______________________________________________________________________

REFERENCES: MCCS Policy 303

DATE ADOPTED: March 25, 1997

DATE(S) AMENDED: July 21, 1998; September 23, 2008; January 26, 2010; March 22, 2017; March 2, 2021
Notification of Intent to Plan a New Instructional Program

General Information

Name of Institution: ________________________________

Proposed Program Title: ________________________________

Proposed Program Implementation Date (AY, Semester): ____________

Degree Requested: ____________ Other Award(s): ____________

1. Brief description of the Program: (Briefly describe the purpose of the program and the expected career outcomes.)

2. Reason(s) for adding the Program: (e.g. State and regional need, and student demand)

3. Resources to Support Program: (Project the level of resources required to achieve program quality and utility.)
New Instructional Program Proposal (NIPP)

General Information

Name of Institution: ___________________________________

Program Title: _______________________________________

Proposed Program Implementation Date: _______________

Degree Requested: ____________ Other Award(s): __________ CIP Code: ___________

Options (if any): ____________________________________

A. Process

1. College Program Approval (Institutional)
   College Governance Process Date: ____________
   Dean of Academic Affairs Date: ____________
   President Date: ____________

2. Intent to Plan Review and Comment
   Academic Affairs Council Date: ____________
   MCCS Chief Academic Officer Date: ____________
   System President Date: ____________
   College Presidents Date: ____________

3. NIPP Recommendation for Approval
   MCCS Chief Academic Officer Date: ____________
   Presidents Council Date: ____________
   MCCS President Date: ____________
   BOT Education Committee Date: ____________
   Board of Trustees: Date: ____________

B. Documentation
   MCCS CAO Update Academic Inventory Date: ____________
   College President Update College Catalog Date: ____________
a. Program Proposal - Description, Objectives, and Content

1. Describe the purpose and objectives of the program and career outcomes (i.e. the catalog copy). List the expected learning outcomes for graduates.
2. Will this program be related to other programs at your institution? If so, please explain.
3. Identify any existing program, option, concentration, or track that this program will replace.
4. Is it likely that this program will reduce enrollments in other programs at your institution? If so, please explain.
5. List new courses that will be added to your curriculum specifically for this program. Indicate course number, title, and credit hour value for each course.
6. Program Completion Requirements:
   - Credit hours required in major courses;
   - Credit hours in general education requirements;
   - Credit hours in required or free electives;
   - Credit hours for any option, specialization, track; and
   - Total credit hours required for completion.

Describe any additional requirements such as a comprehensive examination, practicum or internship, some of which may carry credit hours included in the list above.

Attach the Associate Degree and/or Certificate curricula by semester to this proposal as APPENDIX A.

7. If there is a recognized specialized accreditation agency for this program, please identify the agency and explain why you do or do not plan to seek accreditation. Indicate if graduation from an accredited program is a requirement to sit for a required licensure exam.
8. If passage of a licensure examination is required for employment in the proposed field, identify the examination and the administering body.
9. Identify institutions of higher education with which you will articulate transfer of credits for this program.
10. Will the program, or any part of it, be delivered using any type of distance education technology? If not, why?
11. Will the program be offered using non-traditional scheduling, e.g. evenings, weekends?
b. Program Need Justification

1. Will the program satisfy a clearly documented need (institutional, societal, and employability)?

2. Describe the need as indicated by human resources and economic development targets; state, regional and local studies, including MDoL projections and surveys to determine student interest and demand for graduates by employers; and, if appropriate, statement from regional employers supporting the program.

3. If the program duplicates or closely resembles another program already offered in the state, explain why this duplication is justified.

4. Based on your research on the employment market for graduates of this program, indicate the total projected job openings that require graduates from a program such as the one proposed (including both growth and replacement demands) in your service area as well as the state at large.

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<thead>
<tr>
<th></th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
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5. Give a brief description of the methodology used to determine the projected job openings (such variables as (a) assurance of adequate employer surveys, (b) business/industry markets, and (c) response rate. Cite all relevant sources. Whenever possible, EMSI Analyst employment data/projections should be utilized. If a survey of employment needs was used attach a copy of the survey instrument with a summary of results as APPENDIX B. Do not submit copies of the individual survey responses.

6. If the program is primarily intended to meet needs other than employment needs, present a brief rationale.

7. If similar programs are available at other institutions in the state, will any type of program collaboration be utilized? Why or why not? What specific efforts have been made to collaborate with institutions to meet the need for this program? Address qualitative, cost, and access considerations of any collaborations that were considered.

c. Program Admissions Requirements, Enrollment Projections and Completion Projections

1. Describe briefly any criteria or screening process that will be used to select students for admission to the program.

2. Describe the methodology for determining enrollment projections.

3. Provide a realistic estimate of enrollment at the time of program implementation and over a five-year period based on the availability of students meeting the criteria stated above.
<table>
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<tr>
<th>Enrollment</th>
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<th>Year 3</th>
<th>Year 4</th>
<th>Year 5</th>
<th>Total</th>
<th>Annual Average</th>
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4. Project the award completions and ratios.

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<th>Projected Award Completions</th>
<th>Year 1</th>
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<th>Year 3</th>
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<th>Year 5</th>
<th>Total</th>
<th>Annual Average</th>
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<tr>
<th>Projected Program Completion Ratio to Total Headcount Enrollment</th>
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**d. Program Resource Requirements**

1. Number of currently employed faculty who will teach in the program:
   - Primary Faculty / Full-time _______ Part-time ______________
   - Support Faculty / Full-time _______ Part-time ______________
   
   Attach a synopsis of the qualifications (degrees, experience, etc.) of each existing faculty member to this proposal as **APPENDIX C**. Do not attach entire curriculum vitae. This should be no more than one paragraph per faculty.

2. Number of additional faculty who will be employed to teach in the program during the first five years:
   - Primary Faculty / Full-time _______ Part-time ______________
   - Support Faculty / Full-time _______ Part-time ______________

3. Describe any special equipment that is necessary for this program, indicating what is currently available, what will be added, and the cost of additional equipment.

4. Describe facilities for the program, indicating what is currently available and any necessary renovation or additional facilities that would be added. Provide a cost estimate for any renovation or additions. If clinical sites are required, provide signed agreements between the institution and the host facility. At a minimum, the total number of slots should equal the projected number of students cited above.

5. Provide an indication of the current status of the library collections supporting the proposed program. Describe how any deficiencies will be remedied, including the cost of such remedies.
**e. Costs and Financial Support of the Program**

1. Provide a realistic estimate of the costs of the program. This should only include the additional costs that will be incurred, not current costs. All sources and amounts of funds for program support should be indicated.

   Estimated New Funds Required to Support Proposed Program

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*Additional faculty salaries should be shown in all five years.

Sources and Amounts of Funds Available for Program Support

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*Please identify source(s) of extramural funds.