

ALASKA COMMISSION ON POSTSECONDARY EDUCATION Institutional Authorization

Juneau, Alaska 99811-0505 (907) 465-6741 • FAX (907) 465-5316 acpe.alaska.gov • EED.ACPE-IA@alaska.gov

Administrative Approval Form: Program Modification

A change or departure from the program information specified in the Institution's most recently approved Authorization application must be approved by the Commission before implementation. Commission Staff may administratively approve a change in curriculum, instructional delivery method, or senior management, if the change is not significant.

Instructions: Complete this form and pay the \$200 application fee. Attach additional pages to this form, as necessary. Include the name of the program at the top of each additional page.

I. Institution Information:			
Institution Name:			
Individual Completing Form:			Phone Number:
II. Program Modification:			
Type of Modification Requested (check all that apply):			
Program Name Delivery Method Program Lengt	h \Box	Progr	ram Costs
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Will the modification of the existing program change the:	Yes	No	If yes, attach required documents (if applicable)
Title of Program			Current and proposed program title.
Program Objectives			Current and proposed program objectives
Graduation Requirements			Current and proposed graduation requirements
Credential or Certificate Earned			Current and proposed credential or certificate
Entrance Requirements			Current and proposed requirements
Sequence of course/training components			Current and proposed sequence or components
Total number of credit/clock hours			Current and proposed clock/credit hours
Length and/or content of any of the courses or training components			Current and proposed length or contents
Externship components			Current and proposed components
Tuition, fees and/or other charges			Current and proposed break down of costs
Policies pertaining to attendance and/or satisfactory academic progress			Current and proposed
Delivery Modality (online, residential, hybrid)			Current and proposed



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All of the above listed modifications require the following:

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ш	1	Describe what changes have taken place and the rationale for the modification.			
	2	Describe how the program modifications, if approved, will be implemented.			
	3	Describe when the program modifications, if approved, will be implemented.			
	3	Describe when the program mounted and, if approved, will be impremented.			
Required Attachments: Current and proposed sample of impacted sections of the Institution's Catalog.					
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		ification:			
I cert	ify th	at all information provided is complete and accurate.			
Signature: Date:		e: Date:			
- 8	•	e: Date: (Owner or Administrative Official)			
Printe	ed Na	ame of Administrative Official:			
		dministrative Official:			