

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO  
APPROVAL OF NEW DEGREE AND CERTIFICATE PROGRAMS**

Routing Sheet

**Program Title:** \_\_\_\_\_

**Will the program be taught via distance education?\***

Yes \_\_\_\_\_ No \_\_\_\_\_

*\*SACSCOC defines distance education as a formal educational process in which the majority (≥50%) of the instruction (interaction between students and instructors and among students) in a course occurs when students and instructors are not in the same place. Instruction may be synchronous or asynchronous. A distance education course may use the internet; one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or videocassettes, DVD's, and CD-ROMS if used as part of the distance learning course or program.*

**Will any portion of the program be taught at an off-campus instructional site?**

Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes", please provide the name, address, and zip code for the site where instruction will be delivered:

\_\_\_\_\_

Faculty Curriculum Committee Approval

**Name of Committee:** \_\_\_\_\_

**Chair's Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

(Note: Please attach minutes of the Curriculum Committee or other committee documenting faculty review and approval of the educational program proposal.)

**School Dean Review and Approval**

**Dean's Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

**Routing by the Provost and Vice President for Academic Affairs (VPAA)**

Submission must include: (1) completed THECB new program/certificate request form (as appropriate) and (2) completed business plan; (3) minutes from the school's curriculum committee

To determine the appropriate THECB program request form, refer to the THECB [New Degree Program and Certificate Requests](http://www.thecb.state.tx.us/index.cfm?objectid=9B93EB02-0FD4-6E46-E15D47A110934F05) website:

<http://www.thecb.state.tx.us/index.cfm?objectid=9B93EB02-0FD4-6E46-E15D47A110934F05>

The Provost/VPAA Office will secure the following approvals:

**Library Director Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Financial Aid Officer Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Student Business Services Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Registrar Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**IT Classroom Support Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Student Services Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Chief Financial Officer Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_

**Provost/VPAA Review and Approval**

**Provost/VPAA Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

**President Review and Approval**

**President Signature:** \_\_\_\_\_

**Date of Approval:** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
\_\_\_\_\_

**Board of Regents' Review and Approval**

**Date of Approval:** \_\_\_\_\_