



SOUTHERN UNIVERSITY AT SHREVEPORT
Division of Academic and Student Affairs
Process to Establish New Program

PROCESS	DATE	SIGNATURE
Letter of Intent and complete packet to establish a new program		
Official Name of Program		
Total Credit Hours of Program		
Type of Degree or Certificate		
CIP Code		
Date Reviewed by the Curriculum Committee		
Date Approved by the VC of Academic and Student Affairs		
Date submitted to SACS Liaison for SACSCOC Notification		
Date Approved by Chancellor		
Date Notification submitted to SACSCOC by SACSCOC Liaison		
Date Approved by Southern University Board of Supervisors		
Date Approved by the Louisiana Board of Regents		
Date Complete Packet submitted to the Office of Financial Aid		
Term and Year of Program Implementation		

 Vice Chancellor, Academic and Student Affairs

 Date

 Director of Financial Aid

 Date

Provide a completed copy of this form to the Office of Financial Aid