PORMAT 5

Submit originals and one copy and electronic copy to Governance/Faculty Senate Office (email electronic copy to jbharvie@alaska.edu)

UBMITTED BY:		PROGRAM/DEGREE REQ	UIREMENT CHANGE (MAJOR)
ODMITTION DIS				
Department	Allie	d Health	College/School	UAF Community and Technical College
Prepared by	Cath	y Winfree	Phone	907-455-2876
Email Contact		nfree@alaska.edu	Faculty Contact	Cathy Winfree
See http://ww complete desc	w.uaf. riptic	edu/uafgov/faculty-ser on of the rules governi	nate/curriculum/cou ing curriculum & co	rse-degree-procedures-/ for urse changes.
PROGRAM IDE	NTIFI	CATION:		
DEGREE PROG	RAM		Dental Assisting	
Degree Leve B.S., M.A.,		e., Certificate, A.A., Ph.D.)	A.A.S., B.A.,	Certificate
. CHANGE IN	DEGRE	B RBQUIREMENTS: (Brie	ef statement of prog	gram/degree changes and
Dental Assist 1. Complete t 2. Complete t computation 3. Complete t	BQUIRE ant — C he gener he certif and hun he follow	entificate Program ral university requirements (pa ficate requirements. (See page 9 ficate requirements is embedd wing program (major) requirer rative Procedures for the Denta diography	ge 94). 66. As part of the certificat led in the major required c	c requirements, the communication, courses for this program.)

c. - <u>-</u>	PROPOSED REQUIREMENTS AS IT WILL APPEAR IN THE CATALOG WITH THESE CHANGES: Underline new wording strike through old wording and use complete catalog format)
	Dental Assistant — Certificate Program
والمراقبة	1. Complete the general university requirements (page 94). 2. Complete the certificate requirements. (See page 96. As part of the certificate requirements, the communication, computation and human relations content is embedded in the major required courses for this program.) 3. Complete the following program (major) requirements: * DA F132—Administrative Procedures for the Dental Assistant
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D.	BSTIMATED IMPACT WHAT IMPACT, IF ANY, WILL THIS HAVE ON BUDGET, FACILITIES/SPACE, FACULTY, ETC.
	No impact.
B.	IMPACTS ON PROGRAMS/DEPTS:
	What programs/departments will be affected by this proposed action? Include information on the Programs/Departments contacted (e.g., email, memo)
	No other departments will be impacted.
F.	IF MAJOR CHANGE - ASSESSMENT OF THE PROGRAM:
	Description of the student learning outcomes assessment process.)
	Program Head will monitor the enrollment in HLTH F122 to see if drops significantly.

The purpose of the department and campus-wide curriculum committees is to scrutinize program/degree change applications to make sure that the quality of UAF education is not lowered as a result of the proposed change. Please address this in your response. This section needs to be self-explanatory. If you drop a course, is it because the material is covered elsewhere? Use as much space as needed to fully justify the proposed change and explain what has been done to ensure that the quality of the program is not compromised as a result. Changing the HLTH F122 to possed aligning it with American Heart Association reduces the number of credits to 33. Ocredits Ocredits APPROVALS: SIGNATURES MUST BE OBTAINED PRIOR TO SUBMISSION TO THE GOVERNANCE OFFICE Signature, Chair. Program/Department of: ACLULA HEACTION Date Office Course of the program of the prior to submission to the governance of the number of credits to 33. Ocredits Date Ocredits Date Occurriculum Council for:	JUSTIFICATION FOR ACTION REQUESTED
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Signature, Chair, College/School Curriculum Council for: Date /b/H// Signature, Dean, College/School Of: MALLOW OTC ACASEMIC COLUMN CHAIZ	Date 16/7/16
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Manufole - CTC ACADEMIC COCKOIL CHAIR	
Manifoli - OTC ACADEMIC COCHOIL CHAIR	Signature, Dean, College/School
	of:
CHAIR SIGNATURE OBTAINED FOLLOWING APPROVAL BY FACULTY SENATE COMMITTEE	Collaboration OTC ACADEMIC COCKCIL CHAIR
	CHAIR SIGNATURE OBTAINED FOLLOWING APPROVAL BY FACULTY SENATE COMMITTEE

Signature, Chair, UAF Faculty Senate
__Curriculum Review Committee

Graduate Academic and Advisory Committee

Date