

Academic Review Committee Request Form: New Program

ARC Use Only:
ARC #:
Program ID:
Status:
(A=Approved, I=Information item, R=Returned
Date rec'vd by ARC:

All ARC program proposals must be submitted electronically. Please work with your unit ARC representative to be sure your proposal is complete. After your proposal has received the required approvals, e-mail this completed form along with all supporting materials to ARC@ramapo.edu. Please use digital signatures for approvals.

ogram Title:	BS in Cybersecurity			
riginator(s) of the Pro	posal: Scott Frees			
oposal Date:	<u>1</u> 1/1/2023			
hool(s): TAS	Co	onvening Group(s):		
		program, and all supporting		
cluding the Provost's	pre-approval of the p	rogram feasibility.		
ECTION B: Approv	ale			
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	ca by .			
tle onvener (if a convening	Type Name	Signature	D	ate
onvener (if a convening oup exists)				
duate Council Chair				
an TAS				
her Dean, ASB				
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RC Disposition:				
	nly - no ARC approva	2		
	approval by the Facul			
_ ARC does NOT fe	commend approval by	the Faculty Assembly		
RC Chair:			_ Date:	
Signatu	re			
RC recommends the f	following:			
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ffice of the Provost U	sa Only:			