



**Academic Review Committee
Request Form: New Program**

ARC Use Only:
 ARC #: _____
 Program ID: _____
 Status: _____
(A=Approved, I=Information item, R=Returned)
 Date rec'd 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.

SECTION A: Program Information

Program Title: _____

Originator(s) of the Proposal: _____

Proposal Date: _____

School(s): _____ Convening Group(s): _____

Please attach a description of the proposed program, and all supporting documentation including the Provost's pre-approval of the program feasibility.

SECTION B: Approvals

Reviewed and Approved by:

Title	Type Name	Signature	Date
Convener (if a convening group exists)			
Graduate Council Chair			
Dean			
Other			

ARC Disposition:

- Information item only - no ARC approval necessary
- ARC recommends approval by the Faculty Assembly
- ARC does NOT recommend approval by the Faculty Assembly

ARC Chair: _____ Date: _____
Signature

ARC recommends the following:

Office of the Provost Use Only:

Approved Not Approved Provost Signature _____ Date: _____