Prior to discontinuation, programs must go through a “phase-out” process. During this time, new students cannot request or enroll in the program, nor can students transfer to the program. Only students currently enrolled in the program will be given up to three years to complete the program requirements and graduate or move to another program. The goals of the phase-out process are to ensure that program discontinuation decisions are data driven, and that all students in the program are given support and adequate time to complete their program or transfer to other programs if preferred**. All efforts should be taken to support students in completing their program.**

*Instructions: Complete the information below, process for signatures and forward the document to the Office of Curriculum and Assessment (SC 257 or* *curriculum.assessment@wccnet.edu**).*

|  |  |  |
| --- | --- | --- |
| **Program** **Code:**  | **Program Name:**  | **Effective Academic Year to Begin Phase-out (must begin in Fall term):**  |
| **Division** **Code:**  | **Department:** | **Academic Year to Discontinue** **Program (3 years following beginning of phase-out):** |

|  |
| --- |
| **Rationale for discontinuation: Comprehensive program analysis must be completed before requesting program discontinuation. Requestor must include with this form data from that analysis justifying the request, *including but not limited to the following:***1. 1. Program enrollment for past 5 years
2. 2. Graduation/completion rates
3. 3. Estimated current program costs (e.g. personnel, equipment, etc.)
4. 4. Job outlook, including wage data, job openings, and projected growth or decline
5. 5. Advisory committee feedback (if applicable)
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Describe the phase-out plan. Include *at a minimum* the following:**1. 1. Number of currently enrolled students (including those in related Transfer programs).
2. 2. List below or attach separately a list of current students *(do not include names)* with the following information: total credits earned; which courses have been completed; which courses are they in currently; what courses remain to complete.

*Sample*: *Certificate* *Program X*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Student | Enrolled F22 | Enrolled W23 | Total Credits Earned | Program Classes Completed | Current Classes Enrolled | Courses Remaining |
| 1 | x | x | 6 | XYZ 109, 110 | XYZ 120; ABC 115 | XYZ 130, 140 |
| 2 |  | x | 0 | 0 | XYZ 109 | XYZ 110, 120, 130,140, ABC 115  |
| 3 | x |  | 12 | XYZ 109, 110, 120 ABC 115 | 0 | XYZ 130, 140 |

1. 3. Describe your communication plan providing information regarding the phase-out to current students, advisors, and other appropriate parties. Include estimated content and timeline for communications.

4. Are there active Transfer programs associated with this program? |

|  |
| --- |
| **List all departments that are currently using this program and the date they were notified of the planned discontinuation:** |

**Signatures:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Reviewer** | Print Name | **Signature** | **Date** |
| Initiator |  |  |  |
| Department Chair |  |  |  |
| Division Dean |  |  |  |
| **STOP HERE**Please submit completed form to the Office of Curriculum and Assessment (SC 257) or by e-mail to curriculum.assessment@wccnet.edu Once reviewed by the appropriate faculty committees we will secure the signature of the VPI and President. |
| **Reviewer** | Print Name | **Signature** | **Date** |
| Curriculum Committee Chair | Randy Van Wagnen |  |  |
| Interim Vice President for Instruction | Dr. Brandon Tucker |  |  |
| President | Dr. Rose B. Bellanca |  |  |