## **TN Tech Internal Cover Form**

## **Required for all proposals**

(if applicable)

Please refer to the TTU Office of the Provost website for New Programs and Program Modifications before developing a proposal. <a href="https://www.tntech.edu/provost/new-programs">https://www.tntech.edu/provost/new-programs</a>

Degree Designation or Type of Certificate:			
Formal Degree Abbreviation Title of Propo	sed Program to be Established	or Impacted	
Tornial Degree Abbreviation Title of Fropo	sed i rogram to be Established	or impacted	
Concentrations:			
Action Requested:			
Proposed Effective Date:			
For more information contact:Name		/ Telephone	
Committee Approvals:	Approval Date:		
University Curriculum Committee (undergraduate programs)	Approval Date:		
(1.00)			
Graduate School Executive Committee	Approval Date:		
(graduate programs)			
Admissions and Credits Committee	Approval Date:		
(if applicable)			
Academic Council	Approval Date:		
(if applicable)	Approval Date.		
Approval:			
Signature of Provost	Date		
TN Tech Board of Trustees	Approval Date:		