Graduate Academic Standards Change Form

Ouachita Baptist University

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| **Date Submitted** | |  | | | | | | |
| **Academic Year Change Goes into Effect** | | |  | | | | | |
| **Confirm (X) approval of this proposal.** | | |  | Vice President for Academic Affairs | | | | |
| **Confirm (X) notification of this proposal prior to faculty vote.** | | | | | |  | | Accreditation Liaison Officer |
|  | | | | | | | | |
| **State the proposed change.** | | | | | | | | |
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| **State the rationale of the proposed change.** | | | | | | | | |
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| **Indicate how the proposed change may impact a student’s degree plan.** | | | | | | | | |
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| **Indicate how the proposed change should appear in the graduate catalog.** | | | | | | | | |
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| **Indicate (X) and briefly explain method(s) of evaluating effectiveness of proposed change.** | | | | | | | | |
| Quantitative Assessment | | | | | Qualitative Assessment | | | |
|  | Exit Exams | | | |  | | Advisory Board Recommendations | |
|  | Pass Rates | | | |  | | Outside Reviews | |
|  | Test Scores | | | |  | | Surveys | |
|  | Other | | | |  | | Other | |
|  | N/A | | | |  | | N/A | |
|  | | | | | | | | |
| **Graduate Council Recommendation** | | | | | | | | |
|  | Approved | | | |  | | Clarification and/or Revision Needed | |
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| **Comments** | | | | | | | | |
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