

2024-2025 Request for Program Deletion

For questions regarding program modifications, please contact

Heather Peck (hpeck@osrhe.edu).

NOTE: This form cannot be saved and should be completed in its entirety at one time.

INSTITUTION AND CONTACT INFORMATION

Institution *

East Central University

Name of Chief Academic Officer *

Dr. Jeffrey Gibson

Email of Chief Academic Officer *

jgibson@ecok.edu

Are you the Chief Academic Officer *

No

Name of person completing this form *

Dr. Jerry Mihelic

Title of person completing this form *

Dean

Email of person completing this form *

gmihelic@ecok.edu

Date of Governing Board Approval

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PROGRAM INFORMATION

Official Degree Designation and Program Title *

e.g. Associate in Science in Cybersecurity, Bachelor of Fine Arts in Music Performance, Master of Science in Accounting

Bachelor of Science Special Education Mild/Moderate

Program Code *

Please list the 3-digit OSRHE program code.

440

This program has approved options *

☐ Yes ☒ No

Is this program part of a cooperative agreement? *

☐ Yes ☒ No

NOTE: A separate Modification(s) to Existing Program form will need to be completed for each embedded certificate related to the modification of the main program.

DELETION DETAILS

When will the program be deleted? *

☐ effective immediately ☒ effective beginning Fall 2025

Will any courses be deleted from the course catalog? *

☒ Yes ☐ No

Number of courses to be deleted

Seven

Are students still enrolled in the degree program? *

☒ Yes ☐ No

How many students are currently enrolled in the program?

1

Expected year of graduation for last student

What is the expected graduation date for currently enrolled students?

(Indicate N/A if no students are enrolled.)

Spring 2025

Will enrolled students be able to complete program requirements?

☒ Yes ☐ No

Describe the teach-out plan.

Please include how students in the deleted program will be accommodated and the duration of the teach-out plan.

Last student in the program graduates Spring 2025.

Justification for program deletion *

Please provide a brief summary of the reason for the requested action.

Students have more options if they earn a bachelors in a content area teacher certification programs or elementary and early childhood and then complete special education bootcamp at the master's level. This is the route that students prefer.

Are funds available for reallocation? *

☐ Yes ☒ No

DOCUMENTS

Supporting Documentation

If applicable, submit any documentation related to the requested action.

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