**Texas Higher Education Coordinating Board**

**Request for Consolidation of Programs**

Directions: Use this form to request a program consolidation.

NOTE: This form requires the signature of the Chief Academic Officer/Chief Instructional Officer of the institution certifying the accuracy of the information included.

Submit the completed *Request for Consolidation of Programs* and any supporting materials via the THECB’s Document Submission Portal (<https://www1.thecb.state.tx.us/apps/proposals/>).

Information: Contact the Division of Academic Quality and Workforce at 512/427-6200.

**Administrative Information**

1. Institution:
2. Contact Person – Provide contact information for the person who can answer specific questions about the degree programs being consolidated:

Name:

Title:

E-mail:

Phone:

A consolidation requires at least one other degree program to be brought into an existing major as a concentration to create a single, effective, and efficient degree program.

A consolidated degree program should consist of:

(1) a common set of courses consisting of at least 50 percent of the major coursework

taken by all students in the degree program; and

(2) a separate set of courses for the concentration(s)/track(s) consisting of fewer than 50

percent of the major coursework.

Factors to consider in the decision to consolidate programs include, but are not limited to:

No need for additional faculty or changes in existing faculty expertise.

No additional funding needed for library acquisitions, facilities, or equipment.

Changes result in no disadvantages to graduates of the consolidated degree program.

**Program Information**

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| --- | --- | --- | --- |
| **Degree Programs to be consolidated** | | | |
| **Degree Designation** | **Program Name** | **CIP Code** | **Closure date** |
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| --- | --- | --- | --- | --- |
| **Consolidated program** | | | | |
| **Degree Designation** | **Program Name** | **CIP Code** | **Minimum SCH** | **Existing Program or Create Program?\*** |
|  |  |  |  |  |

\* A consolidation of programs can result from either combining two or more existing degree programs into a program already on the institution’s program inventory or combining two or more degree programs into a program not already on the institution’s program inventory.

1. Briefly give the reasons for consolidation. Include a justification for the choice of CIP code and benefits to the students from a consolidated program.
2. Give examples of similar degree programs at other institutions.
3. Describe the alignment among degree program requirements for each program under consideration for consolidation.
4. Explain how the change could affect programmatic accreditation, if applicable.
5. Describe the cost efficiency benefits of consolidating the degree programs, if applicable.

As applicable, the consolidated program must adhere to the [GIPWE](http://www.thecb.state.tx.us/AAR/UndergraduateEd/WorkforceEd/gipwe.htm) requirements, [*Standards for Bachelor’s and Master’s Degrees*](http://www.thecb.state.tx.us/index.cfm?objectid=777B4B2F-D736-DA41-DE2964C58034AB67) or the criteria for doctoral programs ([Chapter 5, Subchapter C, §5.46](http://texreg.sos.state.tx.us/public/readtac$ext.TacPage?sl=R&app=2&p_dir=&p_rloc=164591&p_tloc=&p_ploc=&pg=1&p_tac=164591&ti=19&pt=1&ch=5&rl=46&dt=&z_chk=&z_contains=)) and the [*18 Characteristics of Texas Public Doctoral Programs*](http://www.thecb.state.tx.us/index.cfm?objectid=E0014CFE-F86C-6F22-A794036BF682835E&flushcache=1&showdraft=1).

If the consolidation is approved, the start date for the consolidated program will be the start date of the oldest existing degree program. Continue to report graduates in the degree programs being phased out under the current CIP Code until the phase-out date.

*I certify that the information supplied for this consolidation request is accurate.*

Chief Academic Officer/Chief Instructional Officer Date