

Juneau, Alaska 99811-0505 Phone: 907.465.6741 | Fax: 907.465.5316

acpe.alaska.gov | EED.ACPE-IA@alaska.gov

Administrative Approval Form: Program Modification

A change or departure from the program information specified in the Institution's most recently approved Authorization application must be approved by the Commission before implementation. Commission Staff may administratively approve a change in curriculum, instructional delivery method, or senior management, if the change is not significant.

Instructions: Complete this form and pay the \$200 application fee. Attach additional pages to this form, as necessary. Include the name of the program at the top of each additional page.

I. Institution Information:					
Institution Name:					
Individual Completing Form:			Phone Number:		
II. Program Modification:					
Type of Modification Requested (check all that apply):	_		_		
Program Name Delivery Method Program Length Program Costs Add/Remove Courses					
Will the modification of the existing program change the:	Yes	No	If yes, attach required documents (if applicable)		
Title of Program			Current and proposed program title.		
Program Objectives			Current and proposed program objectives		
Graduation Requirements			Current and proposed graduation requirements		
Credential or Certificate Earned			Current and proposed credential or certificate		
Entrance Requirements			Current and proposed requirements		
Sequence of course/training components			Current and proposed sequence or components		
Total number of credit/clock hours			Current and proposed clock/credit hours		
Length and/or content of any of the courses or training components			Current and proposed length or contents		
Externship components			Current and proposed components		
Tuition, fees and/or other charges			Current and proposed break down of costs		
Policies pertaining to attendance and/or satisfactory academic progress			Current and proposed		
Delivery Modality (online, residential, hybrid)			Current and proposed		



P.O. Box 110505 Juneau, Alaska 99811-0505

Phone: 907.465.6741 | Fax: 907.465.5316 acpe.alaska.gov | EED.ACPE-IA@alaska.gov

All of the above listed modifications require the following:

1	Describe <i>what</i> changes have taken place and the rationale for the modification.
2	Describe <i>how</i> the program modifications, if approved, will be implemented.
3	Describe <i>when</i> the program modifications, if approved, will be implemented.

Required Attachments: Current and proposed sample of impacted sections of the Institution's Catalog.

III. Certification:

I certify that all information provided is complete and accurate.

Signature:		Date:
0	(Owner or Administrative Official)	
Printed Name of Admir	nistrative Official:	
Title of Administrative	Official:	