Proposal to Deactivate and/or Discontinue a Program

Form 5

Version 2014-11-17

To propose to deactivate and/or discontinue a registered academic program, a campus Chief Executive or Chief Academic Officer must submit **a signed a cover letter and this completed form** to the SUNY Provost at *program.review@suny.edu*. This form may be modified as needed for multiple programs.

Section 1. General Information		
a) Institutional Information	Institution's 6-digit SED Code:	**211000**
	Institution's Name:	Binghamton University
	Address:	*4400 Vestal Parkway East, Binghamton, NY 13902*
b) Campus Contact	Name and title: Courtney Ignarri, Assistant Dean for Academic Planning and Operations Telephone and email: 607-777-4958, cignari@binghamton.edu	
c) Chief Executive or Chief Administrative Officer Approval	**Signature affirms that the proposal has met all applicable campus administrative and shared governance procedures for consultation.** Name and title: Donald E. Hall, Provost & Executive Vice President of Academic Affairs Signature and date:	
	For **programs that are registered jointly** with another institution, all participating institutions must confirm their support of the deactivation and/or discontinuance.	
	Partner institution's name and 6-digit SED Code: Name, title, and signature of partner institution's CEO (or **append** a signed letter indicating approval of this proposal):	

General Notes

1. Each deactivation and discontinuance must be approved by the SUNY Provost.
2. If a proposed discontinued program is the sole program in a HEGIS disciplinary area at a campus, discontinuance requires approval of the SUNY Board of Trustees, but the campus retains its master plan authority in that HEGIS disciplinary area, and the re-introduction of programs in that HEGIS disciplinary area would not require a Master Plan Amendment.

Definitions

Deactivation: A campus decides not to admit any new students to a program but wishes to maintain the program's registration. This may be done to reassess the need for the program or restructure the program or allow currently enrolled students to graduate. This action is internal to SUNY and limited in duration to no more than three years, by which time the program must be reactivated or discontinued.

Deactivation Effective Date: The first regular admission date for which new students will no longer be permitted to enroll in the program.

Discontinuance: A campus decides to stop offering a program and awarding a credential for its completion. After SUNY's review and approval, the program is removed from the State Education Department's *Inventory of Registered Programs* after all continuing students have completed it.

Discontinuance Effective Date: The last graduation date for which a credential for completion of the program is awarded.

(SOURCE: *Memorandum to Presidents*, *Vol. 83, No. 11,* dated August 26, 1983)

Please complete Parts I, II and III.

Part I. REQUEST

Specify the request for approval by checking (X) the appropriate box(es).

[X] **Deactivate a program:** The institution will not accept new students into the program as of the deactivation effective date entered in the table in Part II. The institution will contact the SUNY Provost at program.review@suny.edu within three years of the deactivation effective date to officially discontinue or reactivate the program.

[ ] **Deactivate and Discontinue a program**: The institution will not accept new students into the program as of the deactivation effective date entered in the table in Part II, and all continuing students will have completed the program by the later discontinuance effective date entered in the table in Part II. ***NOTE:*** *If a campus finds that all continuing students will not have completed the program by the discontinuance effective date in the table in Part II, the campus will contact the SUNY Provost at program.review@suny.edu to revise the discontinuance effective date.*

[ ] **Discontinue a program**: The institution is prepared to discontinue the program on the discontinuance effective date entered in the table in Part II, at which time there will be no students enrolled in the program.

Part II. PROGRAM LIST

Complete the table below, expanding it as needed for more programs.

PROGRAM TITLE	AWARD (E.G., B.A.)	SED PROGRAM CODE	HEGIS CODE	DEACTIVATION EFFECTIVE DATE	DISCONTINUANCE EFFECTIVE DATE
1. TESOL	MA	37977	1508	12/1/2026	
2.					
3.					
4.					

Part III. REASON(S) FOR REQUEST(S)

Provide reason(s) for requesting each deactivation and/or discontinuance. Address local, regional and System impact and, if applicable, describe any extenuating circumstances that may require additional accommodations for enrolled students (e.g., providing a teach-out agreement with another institution).

There has been insufficient student demand for in-person enrollment in this program. We believe there is the potential for more interest in this program from those unable or unwilling to relocate to our area. We want to deactivate admissions so that we can change the degree as a distance learning program. Deactivating this program will have no impact on other programs or currently enrolled students.