

New Program Code Replace Program Code Date: _____

X Reactivation of Program Code in Stop Out

REQUESTOR CONTACT INFORMATION

Name _____ Campus _____
 Title _____ Email _____
 Office/Dept _____ Phone _____

NEW PROGRAM CODE TO CREATE

Institution _____ Campus _____
 Level _____ Effective Term _____

| | Code (Max. Characters) | Description | Check if requesting new code: |
|--------------------|---------------------------|-------------|---|
| College | (2) _____ | _____ | <input type="checkbox"/> See Banner form STV_COLL |
| Department | (4) _____ | _____ | <input type="checkbox"/> See Banner form STV_DEPT |
| Degree/Certificate | (6) _____ | _____ | <input type="checkbox"/> See Banner form STV_DEGC |
| Major | (4) _____ | _____ | <input type="checkbox"/> See Banner form STV_MAJR |
| Concentration | (4) _____ | _____ | <input type="checkbox"/> See Banner form STV_MAJR |
| Minor | (4) _____ | _____ | <input type="checkbox"/> See Banner form STV_MAJR |

If a similar major/concentration code exists in Banner, please list the code: _____

Justification to warrant a new major/concentration code similar to an existing major/concentration code:

Is this major/concentration code being used the same way at the other UH campuses? Yes No

Should this program be available for applicants to select as their planned course of study on the online application? *If yes, student may select the code as their only program of study.* Yes No

RULES PERTAINING TO FINANCIAL AID AND 150% DIRECT SUBSIDIZED LOAN LIMIT LEGISLATION

Is 50% or greater of the classes in this program offered at a location other than the Home Campus? Yes No

Is this program/major/certificate financial aid eligible? Yes No

Does this certificate qualify as a Gainful Employment Program (Title IV-eligible certificate program)?
 See <http://www.ifap.ed.gov/GainfulEmploymentInfo/index.html>

Program Length

In academic years; decimals are acceptable. The length of the program should match what is published by the campus in any online and/or written publication.

Special Program Designations A B N P T U

See Special Program Designations Code Definitions on IRAO Program Code Request webpage

Required Terms of Enrollment: Fall Spring Summer Extended

EXISTING PROGRAM CODE TO REPLACE, IF APPLICABLE

| | |
|---|---------------------------|
| Program Code _____ | Program Description _____ |
| Institution _____ | Campus _____ |
| College _____ | Department _____ |
| Level _____ | |
| Are current students "grandfathered" under the program code? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Should the old program code be available for use in Banner? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Effective , old program code will no longer be available to admit or recruit students. | |
| <small>Term (ie. Fall 2022)</small> | |
| <i>This will turn off the online application, recruitment (effects Banner forms SRASUMI and SRAQUIK) and admissions (effects Banner forms SAADCRV, SAAADMS, SAASUMI, SAAQUIK, and SAAQUAN) Banner modules.</i> | |
| Effective , old program code will no longer be available to award degree to students. | |
| <small>Term (ie. Fall 2022)</small> | |
| <i>This will turn off the general student (effects Banner form SGASTDN) and academic history (effects Banner form SHADEGR) Banner modules.</i> | |

ATTACHMENTS

BOR Approved: Sole-credential Certificate, Associate, Bachelor and Graduate Degrees, and sole credential certificates

- BOR Meeting Minutes & Supporting Documents Curriculum

Chancellor Approved: Concentrations, Certificates and Associate in Technical Studies (ATS) Degree

- Memo from Chancellor to notify Vice President for Academic Planning and Policy regarding program action.
 Curriculum

| |
|---|
| <p>CERTIFICATES ONLY: Please check one (1) statement. This certificate is a...</p> <p><input type="checkbox"/> BOR approved certificate. BOR Meeting/Approval Date: _____</p> <p><input type="checkbox"/> Chancellor approved within an authorized BOR program. BOR Program: _____</p> <p><input type="checkbox"/> Chancellor approved CO in accordance with UHCCP 5.203, Section IV.B.10.</p> |
|---|

VERIFICATIONS

By signing below, I verify that I have reviewed and confirm the above information that is pertinent to my position.

| | | |
|---|---|--|
| <p>Registrar (Print Name)</p> <p>_____</p> | <p>Financial Aid Officer (Print Name)</p> <p>_____</p> | <p>For Community Colleges, verification of consultation with OVPCC Academic Affairs: Tammi Oyadomari-Chun or Della Teraoka</p> <p>_____</p> |
| Signature | Date | Signature |
| Signature | Date | Signature |
| Signature | Date | Signature |

ADDITIONAL COMMENTS (Specific instructions, selected CIP Code, applicable applications (System App Wx, CAS ...))



April 3, 2023

MEMORANDUM

TO: Bonnie D. Irwin
Chancellor
University of Hawai'i at Hilo

FROM: Kris Roney
Vice Chancellor for Academic Affairs
University of Hawai'i at Hilo

Kris Roney

Digitally signed by Kris
Roney
Date: 2023.04.03
20:45:22 -04'00'

SUBJECT: Request for Approval for Reactivation of the Bachelor of Science in
Aeronautical Science

SPECIFIC ACTION REQUESTED:

We request reactivation for the following program in the College of Agriculture,
Forestry and Natural Resource Management (CAFNRM) at the University of
Hawai'i at Hilo:

| | |
|--------------|--|
| BS-AERS-CAIT | Bachelor of Science, Aeronautical Science Commercial Aerial Info Technology Concentration |
| BS-AERS-CPPT | Bachelor of Science, Aeronautical Science Commercial Professional Pilot Concentration |

RECOMMENDED EFFECTIVE DATE:

We request the following effective terms:

| | |
|--------------------------------|----------------------|
| Reactivate Program Codes: | Fall 2023 |
| Add to Admissions Application: | Fall 2024 Admit Term |

ADDITIONAL COST:

There is no additional cost associated with this request.

PURPOSE:

The purpose is to reactivate the Bachelor of Science in Aeronautical Science in the College of Agriculture, Forestry and Natural Resource Management. The program is in the process of hiring qualified faculty members and will be able to offer courses needed.

BACKGROUND:

In accordance with the University of Hawai'i Executive Policy, Chapter 5, Academic Affairs EP 5.201 (H.1b): A program may be stopped out by the Chancellor.

ACTION RECOMMENDED:

We recommend that you approve the reactivation of the following program codes:

| | |
|--------------|--|
| BS-AERS-CAIT | Bachelor of Science, Aeronautical Science Commercial Aerial Info Technology Concentration |
| BS-AERS-CPPT | Bachelor of Science, Aeronautical Science Commercial Professional Pilot Concentration |

APPROVED/DISAPPROVED:


Bonnie D. Irwin, Chancellor

4/19/2023
Date

KR:slw

Cc:

Debora Halbert, Vice President for Academic Strategy
Alan Rosenfeld, Associate Vice President for Academic Planning and Policy
Christopher Holland, Interim Vice Chancellor for Student Affairs
Bruce Mathews, Dean, College of Agriculture, Forestry and Natural Resource Management
Sherrie Padilla, Interim Associate Vice Chancellor for Student Affairs
Chelsea Kay-Wong, University Registrar