REQUESTOR CONTACT INFORMATION			6 (144) 170 (17) 18 (14)	
		Effective term of req	uest (Semester-Year): Fall 20	012
Name: Leighton Oride		Title: Admissions Of	ficer & Registrar	
Campus: Kauai Community College		Office/Department:		
Phone: (808) 245-8226		Email: loride@hawa	ii.edu	
1. PROGRAM CODE, MAJOR CODE, CONCENTRAT	ION CODE		Banner forms: SMAPRI	e, soacurr, stvmajr
Institution: Kauai CC (KAU)	College: Instruction	al	Department:	
✓ New program code ☐ Change/replace exis	ting program code:			
	First-Professional	Post-Baccalaureate	Other:	
Degree:		Certificate: (see attached listing)		
If requesting an existing Major code and/or Cond Existing Major: Code Description		nner: Existing Concentrati	on:	Description
If requesting a new Major code or Concen	tration code that doe	s not exist in Banner:		
New Code [4 char/space limit]:	-	30 char/space limit]:		
If a similar major/concentration code exists in Ba	nner, please list the o	ode:	UOOT UOI)E
Is this major/concentration code being used the	same way at other Ul	ł campuses? Yes: Maj	or Codes for HOST and HOF	<u></u>
Is 50% or greater of the classes in this program o	ffered at a location of	ther than the Home Ca (Please consult your Fi	mpus? Yes V No nancial Aid Officer on Program Par	ticipation Agreement impact)
Is this program/major/certificate financial aid elig	gible? Yes		fficer consultation required for all	new program codes)
Should this program be available for applicants t	o select as their planı	ned course of study on (If y	the online application? es, students may select the code as	Yes No s their only program of study.

Replacing or eliminating an existing program o	ode:			Loode? Tyes TNo		
If replacing an existing program code, are curre			r the old	l code? Yes No		
Should the old program code be available for u	se in Banner? Yes	☐ No				
Will the old program code be available for:	Banner Module Online Application Recruitment Admissions General Student Academic History	Yes	No	Ending Term (Semester-Year)		
2. CERTIFICATES ONLY: Does this certificate qualify as a Gainful Emplo (Please consult your Financial Aid Officer or see: http://www.nestificates.approved.hy the Chancello	/ww.ifap.ed.gov/GaintulEnipi	Oymenenio	mucx.num	program)?		
For new certificates approved by the chancem		<u></u>				
3. NEW CAMPUS, COLLEGE, DIVISION, OR DE	PARTMENT CODE			Banner forms: STVCAMP, STVCOLL, STVDIVS, STVDEPT		
Campus code [3 char]:	Campus des	cription [3	O char/spa	ice limit]:		
College code [2 char]:	College des	cription [30	char/spac	ce limit]:		
Division code [4 char/space limit]:	Division des	Division description [30 char/space limit]:				
Department code (4 char/space limit):	artment code [4 char/space limit]: Department description [30 char/space limit]:					

4. NEW COURSE SUBJECT CODE (Subject Alpha)	Banner form: STVSUBJ
College:	Department:
Subject code [4 char/space limit]:	Subject description [30 char/space limit]:
5. NEW MINOR (Minor codes are listed on the Major code)	Banner form: STVMAJR
Minor Code [4 char/space limit]:	Minor Description [30 char/space limit]:
Please briefly describe your request and explain wh	ny you are requesting the code(s):
(see attached)	
SUPPORTING DOCUMENTATION	
Please see the Code Request Guide for the require	ed supporting documents to be submitted. Documents submitted with this form:
Board of Regents meeting minutes and sup	pporting documents provided to the BOR
Memo from UH President	
Memo from Chancellor	
Curriculum (required for requests for new	
Gainful Employment Program notification	to the US Department of Education
Other:	

		The state of the s
CAMPUS VERIFICATION OUN O	Date Date	Undrow
Requestor Signature	C 1V: 8 10004	
Registrar (If different from Requestor) Leighton Oride	Sughta 11- Drile	2/22/12
Print name Email/memo in lieu of Registrar's signature may b	Signature e attached	Date
Financial Aid Officer (Financial Aid Officer Rebecca Thompson	consultation required for all new program codes)	2/22/12
Print name	Signature	Date
Email/memo in lieu of Financial Aid Officer's signa		
For Community Colleges, verification James Dire	of consultation with OVPCC Academic Affai	
Print name Email/memo in lieu of signature may be attached	Signature	Date

Send completed form and supporting documentation to:

Institutional Research and Analysis Office (IRAO)

1633 Bachman Place

Email: iro-mail@lists.hawaii.edu

Sinclair Annex 2, Room 4

Fax: 808-956-9870

Honolulu, HI 96822

Phone: 808-956-7532

After <u>all</u> required forms and supporting documents have been submitted, please allow at least two weeks for processing by IRAO and Banner Central.

FOR INTERNAL USE ONLY	Date form/docs received:
Program code [12]:	Program Description [30]:
CIP code [6]:	CIP description [30]:
Cir code [o].	

Attachment: HOPE and HOST

Existing:

CC-HOPE CA-HOPE Hotel Operations Hotel Operations

AAS-HOST

Hospitality and Tourism

Requested Fall 2012:

CO-HOST-HESS

Hospitality Essentials

CC-HOST-HSMK

Hospitality Sales and Marketing

CC-HOST-HMGT

Hospitality Management

Reason for Request:

The proposed Certificate of Competence in Hospitality Essentials, Certificate of Completion in Hospitality Management, and Certificate of Completion in Hospitality Sales and Marketing will afford students specialty options within the HOST program. The Certificate of Competence is designed to be offered on campus and via distance learning. Additionally, the two Certificates of Completion will provide students with a higher level course selection and/or a broader selection of transferable courses.

APPENDIX B Kaua'i Community College University of Hawai'i Program Action Request

1	Type of Program Action:	⊠ New	Change	Cancel
1.	Type of Flogram Action			

PRESENT	(CC) Hotel Operations	(CA) Hotel Operations	(AAS) Hospitality and Tourism	PROPOSED	(CO) Hospitality Essentials	(CC) Hotel Operations	(CC) Hospitality Sales and Marketing	(CC) Hospitality Management	(CA) Hotel Operations	(AAS) Hospitality and Tourism
	3	3	3	HOST 101	3	3	3		3	3
HOST 101	3	3		HOST 125	3	3	3		3	
HOST 125		3		HOST 150				3	3	33
HOST 150		3		HOST 152				3	3	3
HOST 152		3		HOST 154					3	3
HOST 154		3		HOST 193V				<u> </u>	3	1-3-
HOST 193V				HOST 290		<u> </u>		3	 	
		3-4	3-4	ACC 124 or ACC 201				 	3	3 3
ACC 124 (4) or ACC 201 (3)		3-4	3	BLAW 200		<u></u>			1	1-1-1
BLAW 200	1	1	1	BUSN 89		1_1_	<u> </u>		1 1	3
BUSN 89	3	3	3	BUSN 121		3			3	
BUSN 121	<u> </u>	<u> </u>		BUSN 130			3	3	 	1-1
	1	1	1	BUSN 160	1	1 1			1 1	
BUSN 160	1	 i	1	BUSN 166	1	1_1_				
BUSN 166	 !	 		ECOM 100	<u> </u>		3			-
				MGT 120	<u> </u>		3		3	3
	 -	3	3	MGT 122			4	3	 3	3
MGT 122		 	3	SMKT 150		 	3		+ 3	3
SMKT 150 CULTURAL ENVIRON (one): ANTH 200, BOT 105, HWST 107, HWST 111, PHIL 100, REL 150	3	3	3	CULTURAL ENVIRON (one): ANTH 200, BOT 105, HWST 107, HWST 111, PHIL 100, REL 150		3				3
NATURAL ENVIRONMENT	ļ	 	3	NATURAL ENVIRONMENT Core Options (Fall 2012)			1	3:	3	3
Core Options, Spring 2011 ORAL COMMUNICATION (one): BUS 130, SP 20, SP 151		-3	3	ORAL COMMUNICATION (one):			- 3	3.		
SOCIAL ENVIRONMENT (one):	-	3	3	BUS 130, SP 20, SP 151 SOCIAL ENVIRONMENT	1				3	3
BUS 120 or ECON 130				(one): BUS 120 or ECON 130	-		-		3	3
THINKING/REASONING MATH (one): BUSN 189, ICS 111, MATH 103		3	3	THINKING/REASONING MATH (one): BUSN 189, ICS 111, MATH 100, 103, 111, 115				3	3	3
WRITTEN COMMUNICATION: Core Options, Spring 2011		3	3	WRITTEN COMMUNICATION: Core Options (Fall 2012)						6
ELECTIVE (two for AAS): Any 100 level or higher course not			6	ELECTIVE (two for AAS): Any 100 level or higher course not currently listed		-				
currently listed TOTAL CREDITS	15	45-46	60-61	TOTAL CREDITS	8	15	5 2	1 21	45	60

TIVE (two for AAS): 00 level or higher course not htty listed AL CREDITS	15	45-46	6 60-61	ELECTIVE (two for AAS): Any 100 level or higher course not currently listed TOTAL CREDITS	8	15	21	21
Program Type: Associate in Applied Associate in Arts (AA Associate in Science Certificate of Achieve	A) e (AS)			l⊠ Ceri	tificate of	f Comple f Compet ubject Ce	ence (C	0)

2.

3.	Program	Title
J.	riogiam	HILLE.

CO in Hospitality Essentials, CC in Hospitality Management, CC in Hospitality Sales and Marketing

4. Program Description:

The Hospitality and Tourism (HOST) Program is designed to meet the needs of students who are already employed in the hospitality services industry, who wish to prepare themselves for entry into this field, and who will seek transferability into baccalaureate degrees in either travel industry management or general business.

5. Program Student Learning Outcomes:

- 1. Effectively and purposely use verbal and nonverbal language about HOST topics with confidence and to ensure it is appropriate to the audience.
- 2. Use critical thinking skills to effectively synthesize and evaluate information from assigned readings and articles through written memos, reports, reflective notes, and essay exams.
- 3. Conduct presentation projects that include Internet research and visual media.
- Interact with others through team-building speeches and visual-oral presentations, which are designed to promote teamwork solutions and teach teamwork principles. Values such as respect for diversity, the need for fairness, empathy, and human dignity are stressed.
- Demonstrate self-management related to the Hospitality industry through practices that promote physical, mental, and emotional health.

6.	Proposed	Date	of First Offering:	Fall 2012
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7. Is this program offered at another UH campus? Yes No If Yes, specify campus. If No, why is this program offered at KCC:

The HOST program is offered at Maui College and Hawai'i CC. The Hotel Operations program is offered at Kapi'olani CC.

8. Reason for this Program Action:

The proposed Certificate of Competence in Hospitality Essentials, Certificate of Completion in Hospitality Management, and Certificate of Completion in Hospitality Sales and Marketing will afford students specialty options within the HOST program. The Certificate of Competence is designed to be offered on campus and via distance learning. Additionally, the two Certificates of Completion will provide students with a higher level course selection and/or a broader selection of transferable courses.

	budgee M. Chli	415/212
Proposed by:	Originator Out Office IM	Date VICIDIA
Requested by:	Department/Division Chairperson	Date
Approved by:	Curriculum Committee Chairperson	2/17/12 Date
	Vice Chancellor for Academic Affairs	W/I/N Date
	Chancellor A & Chancellor	2//7/12 Date



February 28, 2012

TO: Anita Huang

Institutional Analyst, IRAO

FR: Leighton Oride

Admissions Officer & Registrar

RE:

UH Code Request Form:

Accounting

UH Code Request Form:

Hospitality and Tourism

With reference page 4, Vice Chancellor James Dire conveyed to me this afternoon that he consulted via telephone with Vice President Peter Quigley.

Should you have any questions, please feel free to contact me via email at loride@hawaii.edu.

Thanks.