**NOTICE of INTENT (NOI)**

**New Degree or Extending Degree to New Locations and/or to the Global Campus**

Send this completed NOI electronically to the Office of the Provost (**provost.deg.changes@wsu.edu**).

|  |  |
| --- | --- |
| Degree Title: |  |
| Department(s) or Program(s) |  |
| College(s): |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Contact Name: |  | Email Address: |  | |
| Contact Phone: |  | Proposed start date: | |  |

|  |
| --- |
| **Mode of Delivery:** |
| Single campus (location):  Multiple locations (list):  Global Campus:  Other: |
| **Rationale for New Degree or Extending the Degree (briefly explain):** |
|  |
| **Collaborative Relationship, if any, with Other Educational Partners (briefly explain):** |
|  |
| **Projected Enrollment:** |
| FTE in Year 1:\_\_\_\_\_\_\_\_\_\_\_  At Full Enrollment by Year \_\_\_\_\_: \_\_\_\_\_\_FTE |
| **Funding:** |
| Proposed New Funding Required:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Proposed Source(s) of Funding (mark all that apply):  State funding:  Self-support (fee-based)  Other (please specify): |

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| --- | --- | --- | --- |
| Provost Office Sign: |  | Date: |  |

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| --- |
| Comments: |
|  |

Revised: 7/20/15

**Send completed form to: provost.deg.changes@wsu.edu**