



## ACADEMIC PROGRAM ELIMINATION FORM

**DIRECTIONS:** Use this form when proposing to eliminate an academic program, degree, major, or primary field of study.

**DATE OF REQUEST:** November 15, 2012

*Date of AAC Approval:*  
September 4, 2013

**INSTITUTION:** CSN

*Date of Board Approval:*

**TITLE OF PROGRAM TO BE ELIMINATED:** Associate of Applied Science - CADD Technology

**EFFECTIVE DATE OF ELIMINATION:** Fall 2014

**A. Reason for proposed elimination of the program**

The CADD Technology Advisory Committee has requested that the CADD Technology AAS degree be deleted. The AAS degree is no longer required by the design employers. All the design industry requires to be a CADD operator is the Special Program side of the degree sheet.

**B. Specify plan to phase out the program, including description of how the needs of currently enrolled students will be met**

The program will be phased out over the next two years. All CADD students will have the opportunity to graduate.

**C. Impact of closure on faculty and staff, and related academic programs**

None

**D. Describe any impact the program elimination will have on accreditation and note any discussions as such that have occurred with the accrediting agency**

None

**E. Describe the process of notifying other institutions regarding impact of the program closure on transfer and articulation**

Other NSHE institutions will be notified once the College Curriculum Committee has approved the deletion.

*Please attach any supporting documentation (i.e. support letters from community, industry).*