

## South Carolina Commission on Higher Education

Nonpublic Postsecondary Institution Licensing

1333 Main Street, Suite 200, Columbia, SC 29201

Telephone (803) 737-2260; FAX (803) 737-2297

Web site: [www.che.sc.gov](http://www.che.sc.gov)

Renea H. Eshleman, Coordinator (803) 737-2281 E-mail [reshleman@che.sc.gov](mailto:reshleman@che.sc.gov)

Lane Jeselnik, Coordinator (803) 737-3918 E-mail [ljesejnik@che.sc.gov](mailto:ljesejnik@che.sc.gov)

Edna P. Strange, Program Manager (803) 737-2287 E-mail [estrange@che.sc.gov](mailto:estrange@che.sc.gov)

### Program Revision Notification (CERTIFICATE, DIPLOMA, OR DEGREE)

Policy and Procedures:

#### A Program Revision Notification must be submitted for the following changes:

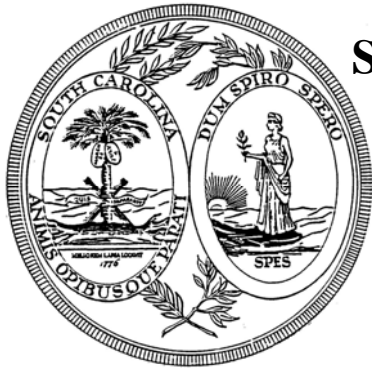
1. Change to a currently licensed program of less than 25 percent in existing contact hours, credit awarded, curriculum content (courses offered) or program length;
2. Adding a concentration to a currently licensed program that is 18 semester (or equivalent) hours or less;
3. Change in the name of an existing program; or
4. Change in the mode of educational delivery.

#### The institution must submit an Amendment to Add New Program Application:

1. When cumulative changes equal or exceed 25 percent of the contact hours, credits, curriculum content, or program length following the initial program approval or last review by the Commission;
2. If cumulative changes to a program within a one-year calendar period equal or exceed 25 percent; or
3. If the change is to add any field or major not previously offered that total more than 18 semester (or equivalent) credit hours.

#### NOTE:

Notwithstanding the above, if the change is more than 25 percent but the program title and objectives are the same, contact a member of the licensing staff for a determination.



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## Program Revision Notification (CERTIFICATE, DIPLOMA, OR DEGREE)

Institution \_\_\_\_\_

Address \_\_\_\_\_

Application prepared by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_ Telephone \_\_\_\_\_

E-mail \_\_\_\_\_ Proposed date of implementation: \_\_\_\_\_

Type of Change:

	Existing	Proposed
Program name		
Curriculum content		
Contact/clock hours awarded		
Credit hours awarded		
Term (Quarter, Trimester, Semester, Other (describe))		
Program length		
Mode of Delivery		
Credential Awarded (Certificate, Diploma, Associate's, Bachelor's, Master's, Doctorate)		
Program length time		

Attach as appropriate:

		Enclosed	CHE USE
(1)	Re-issue license fee of \$30 (if the change is to the name of the program), check or money order payable to the "SC Commission on Higher Education"	Y or N/A	
(2)	An outline of the curriculum, preferably in side-by-side format, showing the existing and proposed curriculum	Y or N/A	
(3)	If the institution is out-of-state, evidence of approval from the home state	Y or N/A	
(4)	A brief explanation of the rationale for the change	Y or N/A	

By signing this application, the applicant is confirming that the institution continues to comply with the provisions of the Nonpublic Postsecondary Institution License Act, CHE regulations, and conditions for licensure.

School Official's Signature

Date

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