

Ex. field locations; employer worksite

ACADEMIC PROGRAM INVENTORY INFORMATION

Complete a form for each degree program (including tracks, concentrations, and specializations independently) in your department. Program Title ___ CIP Code _ _____ Degree Designation ______ Specialized Accrediting Agency Yes () No (Degree Level _ TRACK CONCENTRATION SPECIALIZATION () Track/Concentration/Specialization Title Hours **Total Hours Total Hours Hours in Track** Hours of Free Required Concentration of Guided in Degree Electives² for Degree **Program Core Specialization** Electives1 For this purpose, a guided elective is any elective that is part of a major/area. Student must earn a C or higher for the elective to be accepted. ²For this purpose, a *free elective* is any academic area not required for a major/area or minor. Answer each question below as it applies to the program/track/concentration/specialization listed above. **A.** Is there a practicum or clinical residency? No () **B.** Is there a required internships? **C.** Can the entire program be completed at a regional campus? Yes () No() Is this program offered... (select all that apply) D. 100% Face to Face in Classroom No (**E.** 100% Distance Learning (any distance learning platform) Yes () No() **F.** 100% Online No() Are there any on-campus requirements? No (Is there a guarantee that all required courses will be offered online? Yes () No (Is this a 2+2 joint program? G. Face to Face and Distance Learning Yes() No() If you answered yes to E or G, mark all that apply: hybrid courses interactive television (more than one type of instruction Ex. classroom time and web time) self-paced distance learning courses technology-enhanced instruction (correspondence, mail) Ex. Skype; LMS [Canvas, Blackboard] web courses **H.** Does this program use alternative formats such as those listed below? If yes, mark all that apply: accelerated courses evening/weekend/early morning classes instruction at nontraditional locations modularized courses