**Routine De-registration of a Program**

**[INSERT NAME OF ACADEMIC UNIT]**

**Name of the Program and Degree Award:**

**Summary:**

**HEGIS # and NY State Program Code #** (as listed in State's Inventory of Registered

Programs at <http://www.nysed.gov/heds/irpsl1.html>):

**MHC Code** (Be sure to include the Macaulay Honors College HEGIS Code when applicable.):

**Effective Term:**

1. *HISTORY AND REASONS FOR DEREGISTERING THE PROGRAM*
2. Requirements:

|  |
| --- |
| **List of Courses (Prefixes, Numbers, Names) Crs.**  |
| **Major:****Sub-total**: **Electives:****Total credits required:**  |

1. Consultation Statement:
2. Is the proposed change likely to affect other Departments or Programs?

[ ] NO [ ] YES – If yes, list department/program:

Specify who was consulted and the nature of the consultation:

(The head of the academic unit, such as department chair, or the curriculum committee should be consulted. Indicate whether the consultation happened via email or meeting and what was discussed).