CHANGE MASTERS DEGREE PROGRAM FORM

1. GENERAL INFORMATION

College:	Fine Arts		Department:	Arts Administration
Current Major Name:	Arts Administration		*Proposed Major Name:*	*same*
Current Degree Title:	MA		*Proposed Degree Title:*	
Formal Option(s):	N/A		*Proposed Formal Option(s):*	
Specialty Fields w/in Formal Option:	N/A		*Proposed Specialty Fields w/in Formal Options:*	

Date of Contact with Institutional Effectives[1]:		3/22/18

Bulletin (yr & pgs):	2018, p. 6	CIP Code[1]:	50.1001	Today's Date:	3/20/18

Accrediting Agency (if applicable):	N/A

Requested Effective Date:	☒ Semester following approval.	OR	☐ Specific Date[2]:	

Dept. Contact Person:	Geri Maschio	Phone:	7-8201	Email:	g.maschio@uky.edu

2. CHANGE(S) IN PROGRAM REQUIREMENTS

		Current	*Proposed*
1.	Number of transfer credits allowed	N/A	
	(Maximum is Graduate School limit of 9 hours or 25% of course work)		
2.	Residence requirement (if applicable)	N/A	
3.	Language(s) and/or skill(s) required	N/A	
4.	Termination criteria	N/A	
5.	Plan A Degree Plan requirements[3] (thesis)	N/A	
6.	Plan B Degree Plan requirements[3] (non-thesis)	N/A	
7.	Distribution of course levels required	N/A	
	(At least one-half must be at 600+ level & two-thirds must be in organized courses.)		
8.	Required courses (if applicable)	750, 660	*substitute 1 elective for 750; change 660 from required to elective*
9.	Required distribution of courses within program (if applicable)	N/A	
10.	Final examination requirements	N/A	

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[1] Prior to completing out this form, you MUST contact Institutional Effectiveness, which can provide you with the CIP (OSPIE@l.uky.edu or 257-1962).

[2] Program changes are typically made effective for the semester following approval. No changes will be made effective until all approvals are received.

[3] If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

11.	Explain whether the proposed changes to the program (as described in sections 1 to 10) involve courses offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s)</u>.
	N/A

12.	List any other requirements not covered above?
	N/A

13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.
	The Arts Administration MA is entering its 4th year of existence. When we created the curriculum, AAD 750 was intended to be an opportunity for students to conduct research. However, our students are working professionals and we discovered that they benefit more from case study analysis, which is standard in the field (which also involves research). We have embedded case studies in other courses and made it part of their grad exam so that they have ample opportunity to engage in this kind of analysis and research. We also now provide the research skills that are tailored to the discipline, such as the Market Research course. By creating electives in lieu of AAD 750, we allow students to tailor the program more to their specific interests (and/or jobs). For example, we offer a course in Emergency Prepardness for the Arts, Venture Philanthropy, and Community Engagement in the Arts as electives that enhance the requirements of the program to serve our non-traditional students. AAD 660 Social and Cultural Entrepreneurism should be changed to an elective since not all students are interested in this area and their current jobs do not include this kind of work.

CHANGE MASTERS DEGREE PROGRAM FORM
Signature Routing Log

General Information:
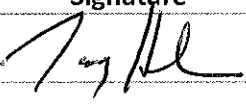
Proposal Name: Arts Administration

Proposal Contact Person Name: Geri Maschio   Phone: 7-8201   Email: g.maschio1@uky.edu

INSTRUCTIONS:
Identify the groups or individuals reviewing the proposal; note the date of approval; offer a contact person for each entry; and obtain signature of person authorized to report approval.

Internal College Approvals and Course Cross-listing Approvals:

Reviewing Group	Date Approved	Contact Person (name/phone/email)	Signature
CFA curriculum comm	4/3/2018	Tony Hardin / 7-3297 / tony.hardin@uky.edu	
		/ /	
		/ /	
		/ /	
		/ /	

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision[4]
Undergraduate Council			
Graduate Council	9/27/18	Roshan Nikou	
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

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[4] Councils use this space to indicate approval of revisions made subsequent to that council's approval, if deemed necessary by the revising council.