CHANGE MASTERS DEGREE PROGRAM FORM

1. GENERAL INFORMATION

College:		Gatton College of Business & Conomics		Department:	Accounting		
Current Major Name: MSACC Program			Proposed Major Name: N		NA		
Current Degree Title:		MSACC		Proposed Degree Title: NA		NA	
Formal Option(s): NA			Proposed Formal Option(s):				
Specialty Fields w/in Formal Option:		NA		Proposed Specialty Fields w/in Formal Options:			
Date of Contact with Associate Provost for Academic Administration ¹ : NA							
Bulletin (yr & pgs): NA CIP Code ¹ :			52.0301 To		ay's Date:	9/28/2017	
Accrediting Agency (if applicable): NA							
Requested Effective Date: Semester following approval. OR Specific Date ² : 2018/19 academic year							
Dept. Contact Person: John Smigla Phone: 323-9683 Email: johnsmigla@uky.edu							

2. CHANGE(S) IN PROGRAM REQUIREMENTS

		Current	<u>Proposed</u>
		· ·	1
1.	Number of transfer credits allowed		
	(Maximum is Graduate School limit of 9 hours or	25% of course work)	
		1	1
2.	Residence requirement (if applicable)		
2			
3.	Language(s) and/or skill(s) required		
4.	Termination criteria		
4.	Termination criteria		
5.	Plan A Degree Plan requirements ³ (thesis)		
0.			
6.	Plan B Degree Plan requirements ³ (non-thesis)		
		·	
7.	Distribution of course levels required		
	(At least one-half must be at 600+ level & two-th	irds must be in organized cours	es.)
		1	
8.	Required courses (if applicable)		
9.	Required distribution of courses within		
	program (if applicable)		
10	metal a subscription of the subscription	A CC (21	100510
10.	Final examination requirements	ACC 621	ACC 516
11.	Explain whether the proposed changes to the pro	ogram (as described in sections	1 to 10) involve courses

¹ Prior to filling out this form, you MUST contact the Associate Provost for Academic Administration (APAA). If you do not know the CIP code, the APAA can provide you with that during the contact.

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.

CHANGE MASTERS DEGREE PROGRAM FORM

	offered by another department/program. <u>Routing Signature Log must include approval by faculty of additional department(s).</u>
	NA
12.	List any other requirements not covered above?
	ACC 621-Understanding Finacial Statements which is currently offered during summer 1 as the fianl capstone course would be moved to the second seven weeks of the spring semester. ACC 516-Advanced Topics in Financial Reporting which is currently offered during the second seven weeks of the spring semester would be moved to summer semester over 6 weeks as our capstone course and the final examination would be given in this course.
13.	Please explain the rationale for changes. If the rationale involves accreditation requirements, please include specific references to those requirements.
	ACC 516 is best suited to be our capstone course where the final examination is given since the sbject matter is very comprehensive and builds on both previous undergraduate and graduate accounting courses. Many students have commented in our exit survey that ACC 516 should be the stand alone course during the summer semester. Also, ACC 516 is more relevant to the FAR section of the CPA exam than any of the other MSACC graduate courses and students sit for this last section in early July after completing the program in June.

CHANGE MASTERS DEGREE PROGRAM FORM

Signature Routing Log

General Information:

Proposal Name: MSACC Capstone Course

Proposal Contact Person Name: John Smigla

Phone: 3239683 Email: johnsmigla@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	
MS Policy Committee	9/19/2017	John Smigla / 323-9683 / johnsmigla@uky.edu	John Christian DN: cn=John E Smigla, o=UK, ou-School of Accountancy, email=johnmiglasuby.edu, c=US Date: 2017.10.17 10:43:55-04'00'	
Gatton Graduate Policy Committee	10/13/2017	KennethTroske / 2571282 / ktroske@uky.edu	Digitally signed by Kenneth R. Troske Dik cn-Marneth R. Troske Dik cn-M	
		/ /		
		/ /		
		/ /		

External-to-College Approvals:

Council	Date Approved	Signature	Approval of Revision ⁴
Undergraduate Council			
Graduate Council	10/27/17	Roshan Nikou	
Health Care Colleges Council			
Senate Council Approval		University Senate Approval	

Comments:

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