A graduate certificate shall have a clear and focused academic topic or competency as its subject, meet a clearly defined educational need of a constituency group, such as required continuing-education or accreditation for a particular profession, respond to a specific state mandate or provide a basic competency in an emerging (preferably interdisciplinary) topic. Certificates are minimally nine graduate credit hours but typically no more than 15. Completed forms must receive appropriate department/school approval and sent to the college for review.

Once approved at the college level, your college will send the proposal to the Graduate Council for review. Once approved at the Graduate Council, the Graduate Council will send the proposal to the Senate Council office for additional review via a committee and then to the Senate Council. Once the Senate Council has approved the proposal, it is moved to the University Senate. Once approved by that body, the University Senate will send the proposal to the Registrar to be included in the Bulletin. The contact person listed on the form will be informed throughout this process.

By default, graduate certificates shall be approved for a period of six (6) years. Re-approvals are also for six years.

1. GEN	ERAL INFORMATION
1a	Date of contact with Institutional Effectiveness ¹ :
	Appended to the end of this form is a PDF of the reply from Institutional Effectiveness.
1b	Home college:
1c	Home educational unit (department, school, college ²):
1d	Proposed certificate name:
1e	CIP Code (provided by <u>Institutional Effectiveness</u>):
1 f	Requested effective date: Fall semester following approval. OR Specific Date ³ : Fall 20
1g	Contact person name: Email: Phone:
2. OVE	RVIEW
2a	Provide a brief description of the proposed new graduate certificate. (300 word limit)
2b	This proposed graduate certificate (check all that apply):
	Has a clear and focused academic competency as its subject.
	Meets a clearly defined educational need of a constituency group (e.g. continuing education or licensing)

¹ You can reach Institutional Effectiveness by phone or email (257-2873 or institutionaleffectiveness@uky.edu).

² Only cross-disciplinary graduate certificates may be homed at the college level.

³ Certificates are typically made effective for the semester following approval. No program will be made effective unless all approvals, up through and including University Senate approval, are received.

	Responds to a spe	cific state mandate.				
	Provides a basic co	ompetency in an emerg	ing, preferably interdisc	ciplinary, topic.		
2c	Affiliation. Is the grad	luate certificate affiliate	ed with a degree progra	m? (related to	<i>3c)</i> Yes	No 🗌
	If "yes," include a brie	f statement of how it w	vill complement the pro	gram. If "no," i	incorporate a	statement as to
	•	opportunity for a stude	ent to gain knowledge o	r skills not alre	ady available a	at UK. <i>(300</i>
	word limit)					
2d	-	e similar regional or nat			Yes	No L
	If "Yes," explain how t	the proposed certificate	e will or will not compet	e with similar r	regional or nat	ional offerings.
2e		id. State the rationale for	-		•	I for it (e.g.
	market demand, stud	ent requests, state man	ndate, interdisciplinary	topic). <i>(400 wo</i>	rd limit)	
2f	Target student popul	ation. Check the box(es	s) that apply to the targe	et student pop	ulation.	
	Currently enrolled	graduate students.				
	Post-baccalaureat	e students.				
2g	Describe the demogra	phics of the intended a	udience. (150 word lim	it)		
2h	Projected enrollment	. What are the enrollme	ent projections for the	first three year	s?	
		Year 1	Year 2		Year 3	
			(Yr. 1 continuir	ng + new	(Yrs. 1 and 2	continuing +
			entering)		new entering	g)
	Number of Students					
2i	Distance learning (DL). Initially, will any porti	ion of the graduate cert	ificate be offer	red Yes	No 🗍
Z1	via DL?					
	If "Yes," please indica	te below the percentag	e of the certificate that	will be offered	l via DL.	
	1% - 24% 🗌	25% - 49% 🗌	50% - 74% 🗌	75 - 99% 🗌	100	% 🗌
	If "Yes," describe the	DL course(s) in detail, ir	ncluding the number of	required DL co	urses. <i>(300 wo</i>	ord limit)
3. ADM	MINISTRATION AND RES	OURCES				
3a	Administration. Descri	ribe how the proposed	graduate certificate wil	l be administer	ed, including a	ndmissions,
Ja	student advising, rete	ntion, etc. (150 word lir	mit)			

	Faculty of Record and Certificate Director. (related to 2c) The faculty of record consists of	of the grad	duate
	certificate director and other faculty who will be responsible for planning and participation	ng in the c	ertificate
3b	program. The director must be a member of the Graduate Faculty of the University and is	s appointe	ed by the dean
	of the Graduate School. The faculty of record must be comprised of three or more faculty	y. At least	three
	members of the graduate certificate's faculty of record must be members of the Graduat	te Faculty.	
	The graduate certificate is affiliated with a degree program.	Yes 🗌	No 🗌
	If "Yes," list the name of the affiliated degree program below. If "No," describe below the	e process f	for identifying
	the faculty of record and the certificate director, including selection criteria, term of serv	rice, and m	nethod for
	adding and removing members. (150 word limit)		
3c	Course utilization. Will this graduate certificate include courses from another unit(s)?	Yes	No 🗌
	If "Yes," two pieces of supporting documentation are required.		
	Check to confirm that appended to the end of this form is a letter of support from the	o othor un	ito'
	chair/director ⁴ from which individual courses will be used. The letter must include demon		
	collaboration between multiple units ⁵ and impact on the course's use on the home educa-		
	Check to confirm that appended to the end of this form is verification that the chair/o		
	unit has consent from the faculty members of the unit. This typically takes the form of m	eeting mii	nutes.
	Figure 2. Decreases What are the (responses to a live live for the assessed a		t:£: t -
3d	Financial Resources. What are the (non-course) resource implications for the proposed a including any projected budget needs? (300 word limit)	graduate c	ertificate,
	melading any projected budget needs. (500 word mint)		
3e	Other Resources. Will the proposed certificate utilize resources (e.g. departmentally	Yes	No 🗍
эe	controlled equipment or lab space) from additional units/programs?	165	NO [
	If "Yes," identify the other resources that will be shared. (150 word limit)		
	If "Yes," two pieces of supporting documentation are required.		
	Check to confirm that appended to the end of this form is a letter of support from the	e appropri	ate
	chair/director ⁴ of the unit whose "other resources" will be used.		
	Check to confirm that appended to the end of this form is verification that the chair/o		
	unit has consent from the faculty members of the unit. This typically takes the form of m	eeting mii	nutes.
4. IMP	ACT		
	Other related programs. Are there any related UK programs and certificates?	Yes	No 🗌
4a	If "Yes," describe how the new certificate will complement these existing UK offerings. (2		
	in res, describe now the new certificate will complement these existing or offerings. (2	.SU WUTU I	iiiiii)
	If "Voc." two pieces of supporting documentation are required		
	If "Yes," two pieces of supporting documentation are required.		

⁴ A dean may submit a letter only when there is no educational unit below the college level, i.e. there is no department/school.

⁵ Show evidence of detailed collaborative consultation with such units early in the process.

	 Check to confirm that appended to the end of this form is a academic unit administrators. Check to confirm that appended to the end of this form is verthe faculty members of the unit. This typically takes the form of 	erification t	that the chair			
	· · · ·					
5. ADN	IISSIONS CRITERIA AND CURRICULUM STRUCTURE					
5a	Admissions criteria. List the admissions criteria for the propose	d graduate	certificate. (150 word lir	nit)	
	, ,		<u></u>		·	
5b	Core courses. List the required core courses below.					
Prefix	·	Credit				
Numbe	Course Title	Hrs		Course Stat	urse Status ⁶	
			Select one	•••		
			Select one			
			Select one			
			Select one			
			Select one	••		
	Total Credit Hours of Core Courses:					
5c	Elective courses. List the electives below.					
Prefix	&	Credit			7	
Numb	Course Title	Hrs		Course Stat	us'	
			Select one	Select one		
			Select one	••		
			Select one	••		
			Select one	••		
			Select one	••		
			Select one	••		
5d	Are there any other requirements for the graduate certificate? I (150 word limit)	f "Yes," no	te below.	Yes 🗌	No 🗌	
5e	Is there any other narrative about the graduate certificate that st the Bulletin? If "Yes," please note below. (300 word limit)	hould be ir	ncluded in	Yes 🗌	No 🗌	
				1		

⁶ Use the drop-down list to indicate if the course is a new course ("new"), an existing course that will change ("change"), or if the course is an existing course that will not change ("no change").

⁷ Use the drop-down list to indicate if the course is a new course ("new"), an existing course that will change ("change"), or if the course is an existing course that will not change ("no change").

6 455	SESSMENT		
6a	Student learning outcor	es, and skills (learn	e the student learning outcomes for the graduate certificate. List the ning outcomes) students will be able to do upon completion. (Use 50 word limit)
	I		
6b	map proposed measures focus groups, surveys) a assessment (e.g., portfo	s to the SLOs they a s the sole method. lios, research pape	ent. How and when will student learning outcomes be assessed? Please are intended to assess. Do not use grades or indirect measures (e.g. Measures likely include artifacts such as course-embedded ers or oral presentations); and course-embedded test items (embedded ng, nationally or state-normed exams). (300 word limit)
6c	how the faculty of recor	d will determine w	e evaluation procedures for the proposed graduate certificate. Include whether the program is a success or a failure. List the benchmarks, the the program does not meet its objectives. (250 word limit)
	HER INFORMATION		
7a	is there any other inforn	nation about the g	raduate certificate to add? (150 word limit)
8. APE	PROVALS/REVIEWS		
			requirement for individual letters of support from educational unit culty support (typically takes the form of meeting minutes).
	Information below does not administrators and		culty support (typically takes the form of meeting minutes).
	Information below does n	Verification of fac Date	
	Information below does not administrators and Reviewing Group Name	I verification of fac	culty support (typically takes the form of meeting minutes).
ļ	Information below does not administrators and Reviewing Group	Verification of fac Date	culty support (typically takes the form of meeting minutes).
ļ	Information below does not administrators and Reviewing Group Name	Verification of fac Date	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
ļ	Information below does not administrators and Reviewing Group Name	Verification of fac Date	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
ļ	Information below does not administrators and Reviewing Group Name	Verification of fac Date	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
ļ	Information below does not administrators and Reviewing Group Name	Verification of fac Date	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
ļ	Information below does not administrators and Reviewing Group Name	Date Approved	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	culty support (typically takes the form of meeting minutes). Contact Person Name/Phone/Email
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	Contact Person Name/Phone/Email / / / / / / / / / /
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	Contact Person Name/Phone/Email / / / / / / / / / /
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	Contact Person Name/Phone/Email / / / / / / / / / /
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	Contact Person Name/Phone/Email / / / / / / / / / /
8a	Information below does not administrators and Reviewing Group Name (Within College)	Date Approved	Contact Person Name/Phone/Email / / / / / / / / / /

 $^{^{8}}$ This is a plan of how the certificate will be assessed, which is different from assessing student learning outcomes.

		/ /		
8c	(Senate Academic Council)	Date Approved	Contact Person Name	
	Health Care Colleges Council (if applicable)			
	Graduate Council			

