Revision Of Undergraduate And Graduate Programs

Format For Review By University Curriculum Committee (UCC) and Graduate Council.

1. Proposing College / School: Liberal Arts
   Department: Philosophy

2. Title of Affected Program: Philosophy

3. CIP Code of Affected Program: 38.01
   (If applicable)

4. Proposed Implementation Date: 08/01/2012

5. Justification:
   (Include a concise, yet adequate rationale for the revision of the program, citing accreditation, assessments (faculty, graduate, and/or external) where applicable.)
   The Department's program review and our recent program assessment indicate that the Religious Studies concentration does not achieve our learning outcomes and that having two concentrations in the same major results in a body of students with disparate interests and abilities. In addition, we are losing our only permanent faculty member in Religious Studies within two years and so there will be no way, given current funding, to teach the required courses.

6. Current Degree Requirements (Including All Formal Options):
   (Provide the current curriculum model for the program, as well as for each formal option.)
   The Philosophy major currently has two concentrations: the Philosophy Concentration and the Religious Studies Concentration.

7. Proposed Degree Requirements (Including All Formal Options):
   (Provide the proposed curriculum model for the program, as well as for each formal option.)
   The Philosophy major will no longer have two concentrations and courses in Religious Studies will no longer count towards a Philosophy major.

8. New Courses Required:
   (Indicate which courses -- if any -- are part of the curriculum that are not currently offered.)
   none

9. Relationship of Proposed Program to Other Auburn University Programs:
   (If the proposed program revision affects any other unit and/or covers material offered by another college/school, attach correspondence with relevant unit.)
   Will the program revision affect other program(s) and/or units at Auburn University? Yes No
   Will the program revision replace any existing program(s), or specializations / options / concentrations within existing program(s) at Auburn University? Yes No
10. New or Additional Resources / Resource Shifting Required:

(If "yes" for any item, please provide explanation in the space provided below.)

- Will additional faculty lines be required?  ✔ Yes  ☐ No
- Will new or additional space (e.g.: laboratory or classroom) be required?  ✔ Yes  ☐ No
- Will additional library resources be required?  ✔ Yes  ☐ No
- Will additional GTA support be required?  ✔ Yes  ☐ No

Explanation of or provision for new or additional resources / explanation of program's support or replacement of other programs:


11. Distance Education:

(If Distance Education will be incorporated in the delivery of the proposed program, provide details of implementation, scope, etc.)

n/a