

## SOUTH DAKOTA BOARD OF REGENTS

## ACADEMIC AFFAIRS FORMS Program Termination or Placement on Inactive Status

UNIVERSITY:	SDSU
<b>DEGREE(S) AND PROGRAM:</b>	Post-Graduate Nurse Educator Certificate
	[SCERTG.PNE]
CIP CODE:	51.3203
UNIVERSITY DEPARTMENT:	Nursing
<b>BANNER DEPARTMENT CODE:</b>	SNUR
UNIVERSITY DIVISION:	Nursing
BANNER DIVISION CODE:	3N

## **University Approval**

To the Board of Regents and the Executive Director: I certify that I have read this proposal, that I believe it to be accurate, and that it has been evaluated and approved as provided by university policy.

President of the University Date

- 1. Program Degree Level: Associate % D F K H O ROUD WW H UD Wtoral •
- 2. Category: Certificate Specialization Minor Major •
- 3. The program action proposed is: Inactive Status Termination •

## 6. TERMINATION WITHOUT ENROLLED STUDENTS

a. Provide a justification for terminating the program:

The College of Nursing requests to terminate the Post-Graduate Nurse Educator Certificate. The request to terminate the post-graduate certificate is based on low program enrollment. No students have completed the certificate in the last 5 years.

- b. What is the proposed date (day/month/year) for the program to terminate (program status in the database changes to Deleted)?
  Spring 2025
- c. What are the potential cost savings of terminating the program and what are the planned uses of the savings?

There are no cost savings from terminating the certificate.

d. What are the resulting employee terminations and other possible implications including impact on other programs?

No employee terminations are necessary. Workload will be redirected to other programs in the college.