



- PUBLIC
- INDEPENDENT

**NEW PROGRAM PROPOSAL FOR ROUTINE REVIEW**

---

*When finished, please save and email to: [he.academicprogramactions@dhe.mo.gov](mailto:he.academicprogramactions@dhe.mo.gov)*

**Sponsoring Institution:**

**Program Title:** Master in Education Instructional Leadership

**Degree/Certificate:**

**If other, please list:** Master in Education Instructional Leadership

**Options:**

**Delivery Site:** Main Campus-Springfield, MO

**CIP Classification:** 130401

**Implementation Date:** 6/1/2013

**Is this a new off-site location?**  Yes  No

**If yes, is the new location within your institution's current CBHE-approved service region?**

*\*If no, public institutions should consult the comprehensive review process*

**Is this a collaborative program?**  Yes  No

*\*If yes, please complete the collaborative programs form on last page.*

**Please list similar or comparable programs at Missouri public institutions of higher education.**

*\*For public institutions only*

**CERTIFICATIONS:**

- The program is within the institution's CBHE approved mission. *(public only)*
- The program will be offered within the institution's CBHE approved service region. *(public only)*
- The program builds upon existing programs and faculty expertise
- The program does not unnecessarily duplicate an existing program in the geographically-applicable area.
- The program can be launched with minimal expense and falls within the institution's current operating budget. *(public only)*

**AUTHORIZATION**

Justin Leinaweaver, Director-Institutional Research and Effectiveness	Justin Leinaweaver	6/18/2018
---	--------------------	-----------

Name/Title of Institutional Officer

Signature

Date

## PROGRAM CHARACTERISTICS AND PERFORMANCE GOALS

---

Although all of the following guidelines may not be applicable to the proposed program, please carefully consider the elements in each area and respond as completely as possible in the format below.

Quantification of performance goals should be included wherever possible.

### 1. Student Preparation

- Any special admissions procedures or student qualifications required for this program which exceed regular university admissions, standards, e.g., ACT score, completion of core curriculum, portfolio, personal interview, etc. Please note if no special preparation will be required.

[Click here to enter text](#)

- Characteristics of a specific population to be served, if applicable.

[Click here to enter text](#)

### 2. Faculty Characteristics

- Any special requirements (degree status, training, etc.) for assignment of teaching for this degree/certificate.

[Click here to enter text](#)

- Estimated percentage of credit hours that will be assigned to full time faculty. Please use the term "full time faculty" (and not FTE) in your descriptions here.

[Click here to enter text](#)

- Expectations for professional activities, special student contact, teaching/learning innovation.

[Click here to enter text](#)

### 3. Enrollment Projections

- Student FTE majoring in program by the end of five years.

[Click here to enter text](#)

- Percent of full time and part time enrollment by the end of five years.

[Click here to enter text](#)

### STUDENT ENROLLMENT PROJECTIONS

YEAR	1	2	3	4	5
Full Time					
Part Time					
Total					

### 4. Student and Program Outcomes

- Number of graduates per annum at three and five years after implementation.

[Click here to enter text](#)

- Special skills specific to the program.

[Click here to enter text](#)

- Proportion of students who will achieve licensing, certification, or registration.

[Click here to enter text](#)

- Performance on national and/or local assessments, e.g., percent of students scoring above the 50th percentile on normed tests; percent of students achieving minimal cut-scores on criterion-referenced tests. Include expected results on assessments of general education and on exit assessments in a particular discipline as well as the name of any nationally recognized assessments used.

[Click here to enter text](#)

- Placement rates in related fields, in other fields, unemployed.

[Click here to enter text](#)

- Transfer rates, continuous study.

[Click here to enter text](#)

## 5. Program Accreditation

- Institutional plans for accreditation, if applicable, including accrediting agency and timeline. If there are no plans to seek specialized accreditation, please provide rationale.

[Click here to enter text](#)

## 6. Program Structure

A. Total credits required for graduation: 33

B. Residency requirements, if any:

A maximum of nine hours of credit earned in a previous program may be applied to a second master's degree.

C. General education: Total credits:

None

*Courses (specific courses OR distribution area and credits)*

D. Major requirements: Total credits: 33 hours

<i>Required Courses</i>		<i>15 hrs.</i>
SCI 621	Educational Technology *(must be taken within the first two semesters)	3 hrs.
EDUC 605	Advanced Educational Psychology & Assessment	3 hrs.
SS 639	Leadership Techniques	3 hrs.
**EDUC 689	Introduction to Educational Research Capstone	3 hrs.
**EDUC 700	Seminar **(must be taken in last 9 hours of program)	3 hrs.

*Courses Required in Emphasis* *18 hrs.*

SS 601	The Sociological Foundations of Education Practices	3 hrs.
SCI 632	Education Evaluation	3 hrs.
EDUC 634	Advanced Curriculum and Instruction	3 hrs.
EDUC 638	Teaching & Learning in Diverse Classrooms	3 hrs.
EDUC 656	Legal and Ethical Issues in Education	3 hrs.
EDUC 657	Developing & Sustaining Professional Learning Communities	3 hrs.

E. Free elective credits: None  
(sum of C, D, and E should equal A)

F. Requirements for thesis, internship or other capstone experience:  
[Click here to enter text](#)

G. Any unique features such as interdepartmental cooperation:  
[Click here to enter text](#)

## 7. Need/Demand

Student demand

Market demand

Societal demand

I hereby certify that the institution has conducted research on the feasibility of the proposal and it is likely the program will be successful.

*On July 1, 2011, the Coordinating Board for Higher Education began provisionally approving all new programs with a subsequent review and consideration for full approval after five years.*

## COLLABORATIVE PROGRAMS

---

- **Sponsoring Institution One:**
- **Sponsoring Institution Two:**
- **Other Collaborative Institutions:**
- **Length of Agreement:**
- **Which institution(s) will have degree-granting authority?**
- **Which institution(s) will have the authority for faculty hiring, course assignment, evaluation and reappointment decisions?**
- **What agreements exist to ensure that faculty from all participating institutions will be involved in decisions about the curriculum, admissions standards, exit requirements?**
- **Which institution(s) will be responsible for academic and student-support services, e.g., registration, advising, library, academic assistance, financial aid, etc.?**
- **What agreements exist to ensure that the academic calendars of the participating institutions have been aligned as needed?**

*Please save and email this form to: [he.academicprogramactions@dhe.mo.gov](mailto:he.academicprogramactions@dhe.mo.gov)*