**UNANTICIPATED PUBLIC PROGRAM CLOSURES**

1. **Consultation**

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| The institution’s CAO is expected to contact the Deputy Commissioner for Academic Affairs and Student Success to discuss the facts and circumstances, when a program or a group of programs in which students are currently enrolled are unexpectedly being considered for discontinuation due to external crises beyond the institution’s control. The Consultation will serve as assistance, support and guidance for the institution in determining how students can best complete their course of study in an efficient and effective manner. |

1. **Teach-Out Plan and Academic Integrity**

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| **1. Teach Out.** Describe the teach-out plan for each closing program leading up to the final closure date. |
| **2.** **Transfer Agreements.** It is the DHE’s expectation that the institution presents students with appropriate options during the teach-out period. To that end, the DHE highly recommends at least one opportunity for students to transfer to an alternative institution instead of the teach-out. Describe transfer or articulation agreements with other institutions for each of the closing programs. Explain the anticipated transferability of program participants’ credits to other institutions. (attach agreements) If there are none, state so specifically. |

**C. Student Data and Student Services**

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| **1. Students.** Provide enrollment numbers by program, number of credits earned, number of credits remaining, and anticipated student completion and graduation dates. This information shall be reported to the DHE in a quarterly status report. See attachment A below.  |
| **2. Student Services.** Describe the services that will be provided to students during the teach out period, including any circumstantial impacts, leading up to the closure of the program; including but not limited to career services, counseling and health services, financial aid, bursar, academic supports, Veterans Education Services, Residential Life, Library, etc.  |
| **3. Financial Aid.** Confirm that financial aid eligibility and institutional scholarship aid will continue during the teach-out period for each program. Explain how this will be communicated to students. |
| **4.** **Student Veterans.** Please provide a list of GI Bill beneficiaries currently enrolled in the programs that have been discontinued.  |

**D. Administration**

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| **1.** **Faculty and Staff.** Please provide the current number of full-time faculty, the number of part-time faculty, the number of full-time support staff, the number of part-time support staff for each of the programs being discontinued. Any changes to this information shall be reported to the DHE 30 days prior.  |
| **2. Employee Reduction Plan.** Provide a staffing timeline by semester/quarter that includes anticipated reductions for both faculty and administrative staff, noting that employee/student ratios should remain constant during the teach-out period. See attachment B below. |

**E. Communication & Records**

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| **1. Current Communication** Describe any publications, communications and public disclosures and their location (e.g., institution’s website, email communications, etc.) regarding the program closures. Include plans for students impacted by special circumstances; Attach any specific communications that the institution has sent and anticipates sending to students, faculty, staff, and alumni regarding the proposed teach-out, closure, and potential transfer and articulation arrangements for each of the 8 programs being discontinued.  |
|  **2. Future Communication.** The institution shall send to the DHE, copies of all communications sent to students, former students, alumni, and media regarding the program closures during the teach-out period.  |

**F. FISCAL**

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| **1. Refund Policy.** What is the institution’s refund policy for closing programs? Describe student eligibility for refunds during the teach-out period. How will this information be communicated to students? |
| **2. Physical Resources.** Indicate how courses and programs will continue to be supported by adequate physical resources during the teach-out period, including but not limited to instructional space, library assets, and electronic databases.   |
| **3. Fiscal Resources.**  Provide a budget indicating that the organization will have sufficient resources to support the obligations set-forth above throughout the teach-out period |

**President Signature**

*By signing below, I understand and attest that all the foregoing statements are true and accurate. I agree to abide by the terms of the teach-out plan and all other applicable laws, regulations, and accreditation standards throughout the teach-out period.*

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| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |
| **Print Name:** |  |

**Attachment A: QUARTERLY STUDENT ENROLLMENT BY PROGRAM – SAMPLE**

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| --- | --- | --- | --- | --- |
| **Program with CIP Code** | **# of students currently enrolled** | **Average Credits Earned** | **Average Credits Remaining for Program Completion** | **Expected Graduation Date** |
| Example: BS Graphic Communications 500499B | 8 | 81.1 | 8.9 | 6/28/2008 |
|   | 14 | 68.8 | 21.2 | 9/27/2008 |
|   |  |  |  |   |
| Example: Visual Arts | 20 | 80.9 | 9.2 | 6/28/2008 |
|   | 11 | 69.5 | 20.5 | 9/27/2008 |
|  |  |  |  |  |

**Attachment B: QUARTERLY REPORT OF EMPLOYEES BY PROGRAM/FUNCTIONAL AREA**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Semester/Quarter &Year** | **Program/Functional Area** | **Number of Fulltime Faculty** | **Number of Part-time Faculty** | **Number of Administrative Staff** |
|  |  |  |  |  |
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**QUARTERLY PROGRAM TEACH OUT / TRANSITION PROJECTIONS**

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| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Teach Out****Year 1** | **Transfer Year 1** | **Teach Out Year 2**  | **Transfer****Year 2** | **Teach Out****Year 3** | **Transfer****Year 3** | **Teach Out****Year 4** |
|  Full Time |  |  |  |  |  |  |  |
| Part Time |  |  |  |  |  |  |  |
| Totals |  |  |  |  |  |  |  |

**APPENDICES TO BE ATTACHED**

Communications to Students

Massachusetts GI Bill Beneficiaries