**University of Wisconsin Oshkosh**

# **Form D -** *(Effective April 2016)*

**Additional Location or Conversion to Online Program/ Notification**

Submit this form to provide notification of changes in delivery for off campus or online delivery formats. This information must be reported to the Department of Education and the Higher Learning Commission.

**Program Name**:

Undergraduate Graduate Certificate Only

Credit

**On-Line Programs**

Conversion from face-to-face to *strictly* on-line (50% or more of program on-line)

Addition of on-line delivery, in addition to face-to-face offering(s)

New Online Program (50% of more of program on-line) that did not exist before

**Additional Location – Not on this Campus**

Physical Street Off Campus Address:

City, State, Zip:

Students can complete 50% or more of program at this location through enrollment in

UW Oshkosh courses

**Notification:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Print Name** | **Sign Name** | **Date** | Check here  if you require a copy |
| Department Chair |  |  |  |  |
| College Dean or Designee |  |  |  |  |
| Provost or Designee |  |  |  |  |
| All approved forms are stored in the Public Shared Folder “Approved Curriculum Forms” on the public shared drive. Please call the Provost’s office for more information or access. The approved forms will be shared electronically with those who indicate the request by checking the box above. | | | | |