



Non-Credit Program Information

Name of program:		
[One Program Delivery Per Form]		
Date(s) & time(s):		
Location:		
Anticipated enrollment:		
Total instructional hours:		Total CEUs to be awarded:
University of Maryland unit or Non-UMD organization:		
UMD unit or Non-UMD Organization contact:		
Phone:		E-mail:
University of Maryland academic unit sponsor (for non-UMD Organization) [If known]:		
Academic unit sponsor contact [If known]:		
Brief description of audience:		
Program objectives and rationale (up to 50 words):		

Program must meet the following criteria:

- Learner needs are identified and used as the basis for planned outcomes
- Learner outcomes are clear, specific, measurable
- Learning outcomes are discussed with students as part of the instructional delivery
- Individuals involved in the planning and instructions are competent in the content area and knowledgeable in instructional methods and adult learning processes
- Content and instructional methods are appropriate for each learning outcome and accommodate various learning styles
- Assessment methods measure achievement of learning outcomes
- Learners are provided feedback on their mastery of learning outcomes

Attach a copy of the following:

1. The program agenda showing precise schedule and a sample of the program brochure (if applicable).
2. The program evaluation.

Program Contact Information

Program Contact (please print)

Campus Unit / Organization Name

E-mail

Phone

University of Maryland Unit Approval

The signatures of the unit chair/department head and the College Dean / Unit Head are required.

Chair/Department Head Name (please print)

Chair/Department Head Signature and Date

Dean Name (please print)

Dean Signature and Date

OES Approval

Approved for _____ CEUs

CEU Tracking #: _____

Request not approved because of the following:

Signature and Date: _____