IDAHO STATE BOARD OF EDUCATION
ACADEMIC/PROFESSIONAL-TECHNICAL EDUCATION
NOTICE OF INTENT
to initiate a
NEW, EXPANDED, COOPERATIVE, DISCONTINUED, PROGRAM COMPONENT OR OFF-CAMPUS
INSTRUCTIONAL PROGRAM OR ADMINISTRATIVE/RESEARCH UNIT

University of Idaho
Institution Submitting Proposal

College of Natural Resources / Resource Recreation and Tourism
Name of College, School, or Division Name of Department(s) or Area(s)

Indicate if this NOI is for an Academic _X___ or Professional-Technical _____ Program

A New, Expanded, Cooperative, Contract, or Off-Campus Instructional Program or Administrative/Research Unit (circle one) leading to:

Change in title to the minor in Wilderness and Nature Conservation
(degree or certificate)

Proposed Starting Date: ___2004__________________________________________________

FOR NEW PROGRAMS ONLY

Program (i.e., degree) Title & CIP 2000 (CIP assigned upon receipt of NOI in Provost Office)

☐ Program Component (major/minor/option/emphasis)
☐ Off-Campus Activity/Resident Center
☐ Administrative/Research Unit
☐ Addition/Expansion
☐ Discontinuance/consolidation
☐ Contract Program

This Notice of Intent has been approved by:

College Dean (Institution) Date

Graduate School Dean (as applicable) Date

Chief Fiscal Officer (Institution) Date

Chief Academic Officer (Institution) Date

President Date

State Administrator, SDPTE Date

SBOE/OSBE Approval Date
Before completing this form, refer to the "Board Policy Section III.G. Program Approval and Discontinuance.

1. Briefly describe the nature of the request e.g., is this a new program (degree, program, or certificate) or program component (e.g., new, discontinued, modified, addition to an existing program or option).

   Change the name of Wilderness and Nature Conservation Minor to Parks, Protected Areas, and Wilderness Conservation

2. Briefly describe how the institution will ensure the quality of the program (e.g., accreditation, professional societies, licensing boards, etc.).

   No Change

3. Duplication--Is this request unique to the system? If not, briefly describe the rationale for the duplication.

   No Change

4. Succinct statement of need for program or program modification. Include student and state need, demand, and employment potential. Attach a Scope and Sequence, DPTE Form Attachment B, for professional-technical education requests. (Use additional sheets if necessary.).

   New name more accurately reflects the language used in the field to describe the purpose and mission of the minor.

5. Describe how this request is consistent with the State Board of Education's policy or role and mission of the institution. (i.e., centrality).

   No change to mission and goals of program

6. Resources--Faculty/Staff/Space Needs/Capital Outlay. (Use additional sheets if necessary.):

   Estimated Fiscal Impact: FY 0__ FY 0__ FY 0__

   A. Source of Funds
      1. Appropriated-reallocation
         ____________ ____________ ____________
      2. Appropriated-new
         ____________ ____________ ____________
      3. Federal
         ____________ ____________ ____________
      4. Other:
         ____________ ____________ ____________

   B. Nature of Funds
      1. Recurring *
         ____________ ____________ ____________
      2. Non-recurring**
         ____________ ____________ ____________

   Grand Total
   ____________ ____________ ____________

* Recurring is defined as ongoing operating budget for the program, which will become part of the base.

** Non-recurring is defined as one-time funding in a fiscal year and not part of the base.