**Instructional Program Review & Planning**

**Request for Department Reorganization**

|  |  |
| --- | --- |
| **Existing Department** |  |
| **Proposed Department** |  |
| **Disciplines in Proposed Department** |  |

**IF YOU ARE REQUESTING A DEPARTMENT REORGANIZATION, THE DISCIPLINES INVOLVED IN THE NEW DEPARTMENT MUST WRITE DISCIPLINE BASED PROGRAM REVIEWS TO SUPPORT THIS REQUEST DOCUMENT.**

**T**he following questions are designed to provide the Instructional Council Reorganization Subcommittee with sufficient information to determine if a discipline (or disciplines) would be best served by becoming a separate department (or by unifying with another department). The reorganization subcommittee of Instructional Council will make a recommendation to the Instructional Council and subsequently the Vice-President of Instruction regarding the request.

Please provide all information requested regardless of whether the request is to become a new department by separation from an old one, or to unify with an existing department.

1. **Please describe the department reorganization that is being requested.**
2. **In the table below, list the name(s) of any individual(s) interested in acting as department chair/coordinator for the new department. On the left side of the table, list the name, and on the right side, list their experience in discipline leadership (for example, prior Dept Chair/Coordinator, Program Review writer, Academic Master Plan writer, course scheduling, student club advisor, college committee participation & leadership, etc.)**

|  |  |
| --- | --- |
| **NAME** | **LEADERSHIP EXPERIENCE** |
|  |  |
|  |  |

1. **In order to become an independent department, a discipline must be sufficiently complex to merit separation. The complexity of the department will be evaluated based upon both quantitative and qualitative factors.**

**If the reorganization is approved, the chair/coordinator reassigned time will be calculated based upon the most recently recognized contract calculation terms (currently Summer 2006, Intersession 2007 and Spring 2007).**

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| --- |
| **Discipline Complexity Grid**  |
| **CRITERIA** | **Number** | **LED** | **Notes** | **Actual Data** |
| **Number of Full-Time Faculty** | **2 – 3** | **.01** | **Count actual persons assigned to the area Summer 2006, Intersession 2007, & Spring 2007. Do not include persons on sabbatical or leaves of absence.** |  |
| **4 - 10** | **.02** |  |
| **11 – 15** | **.04** |  |
| **16 – 20** | **.06** |  |
| **Number of Part-Time Faculty** | **1 – 4** | **.05** | **Include all persons for whom a part-time assignment letter was issued each of the following (duplicated count):** **Summer 2006** **Intersession 2007** **Spring 2007** |  |
| **5 – 11** | **.0** |  |
| **12 – 26** | **.20** |  |
| **27 – 39** | **.30** |  |
| **40 – 64** | **.40** |  |
| **65+** | **.45** |  |
| **Classified/Regular FTE** | **0.5 – 2** | **.01** | **Include only FTE for those regular contract positions actually under the direction of the Chair/Coordinator** |  |
| **3 – 5** | **.02** |  |
| **5 +** | **.03** |  |
| **Number of Sections** | **1 - 23** | **.025** | **Include actual sections in published schedule or added for Summer 2006, Spring semester 2007and Intersession 2007(additive count).** |  |
| **24 – 75** | **.10** |  |
| **76 – 100** | **.15** |  |
| **101 – 125** | **.20** |  |
| **126 – 150** | **.25** |  |
| **151 – 175** | **.30** |  |
| **176 – 225** | **.35** |  |
| **226+** | **.40** |  |
| **Representation** | **1** | **.0025** | **Reference the list of approved and projected inventory of programs on file with the State Chancellor’s Office.** |  |
| **2 - 3** | **.005** |  |
| **4+** | **.0075** |  |
| **Budget** | **5,000 – 25,-99** | **.025** | **Include budget dollars, excluding all regular contract employees salaries, under the direction of the Chair/Coordinator Include salary accounts for student and intermittent hourly under the direction of the Chair/Coordinator** |  |
|  | **26,000-49,-99** | **.050** |  |
| **50,000-99,-99** | **.075** |  |
| **100,000+** | **.100** |  |

1. **In addition to the factors of complexity in the table above, there are other quantifiable considerations of program complexity. Please discuss each of the following considerations for achievement of sufficient program complexity to necessitate formation of a separate department.**
	1. **Number of hourly workers: Please specify FTE for each of the following: hourly staff, student hourly workers, work study students**
	2. **Grants: Please provide name of grant(s), purpose, award amount, and dates of award and end.**
	3. **Advisory committees (based on contract criteria for reassigned time—add on/discretionary assignments Appendix I-5)**
	4. **Other**
2. **In addition to quantifiable factors that affect department complexity, there may be other non-quantifiable considerations for achievement of sufficient program complexity to necessitate formation of a separate department.**
	1. **Please fill in the table below describing the physical complexity of the proposed department**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Total # rooms** | **# seats per room** |  **Room Descriptions** | **Total Sq. ft** |
| **Classrooms** |  |  |  |  |
| **Laboratories** |  |  |  |  |

* 1. **Please describe any other non-quantifiable factors that would influence the complexity of the proposed department.**

1. **If your current program review does not include all of the following, please attach a separate sheet that addresses the missing information.**
* **Five year vision for your discipline**
* **SLO assessment plan**
* **Evidence of assessment plan progress**
* **Curriculum review to include potential expansion or modification of curriculum**
* **Professional development needs for faculty & staff if applicable**
* **Strengths and weaknesses of proposed department**
* **Any other relevant information that would add supporting information regarding the complexity of the proposed department.**

1. **Have all members of affected disciplines agreed to this proposed reorganization. If not, please explain the issues that exist with members who are not in agreement.**

**SIGNATURE PAGE:**

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**Signature of Requestor Date**

**I have reviewed this document and affirm that this reorganization has been discussed by department members and that the department approves this reorganization proposal.**

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**Signature of Department Chair/Coordinator Endorsing Discipline Separation Date**

**I have reviewed this document and the calculations for the discipline complexity grid.**

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**Signature of Division Dean Date**

**Recommendation of Instructional Council**

** Instructional Council recommends approval of this request**

** Instructional Council does not recommend approval of this request.**

**If not approved, in the space below, write a short summary of the reasons why the request was not approved.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature, Faculty Co-Chair, Instructional Council Date**

**Recommendation of Vice-President, Instruction**

** Vice-President, Instruction approves this request**

** Vice-President, Instruction does not approve this request.**

**If not approved, in the space below, write a short summary of the reasons why the request was not approved.**

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**Signature, Vice-President, Instruction Date**