

# The University Of Toledo

## New Graduate Program Proposal

\* denotes required fields

College\*: 
  
Dept/Academic Unit\*: 
  
Contact Person\*:  Phone:  (xxx - xxxx) Email:

Program Code\*: 
  
Program Name\*: 
  
Degree to be granted (if applicable): 
  
Minimum number of credit hours for completion\*: 
  
Proposed effective term\*:  ( e.g. 201140 for 2011 Fall)

List all courses which comprise the certificate or degree and identify term offered (summer/fall/spring):

NURS5740 Advanced Health Assessment, pre-requisite; NURS5680 Advanced Physiology and Pathophysiology; NURS5690 Advanced Pharmacotherapeutics;
  
NURS5610 Psychiatric Mental Health Clinical 1
  
NURS 5620 Psychiatric Mental Health Clinical 11
  
NURS 5630 Psychiatric Mental Health Clinical 111

Identify delivery method (Online/in class/off campus):

Please refer to <http://www.utoledo.edu/catalog/> for university catalog.

### Comments/Notes:

The College of Nursing CON currently offers a MSN in the area of concentration of Psychiatric Mental Health Nurse Practitioner. This proposal seeks to create a Master of Science in Nursing Certificate program. All courses for the program are approved and offered in the CON.

THIS IS A CERTIFICATE - THE PROGRAM CODE IS NOT FOR THIS CERTIFICATE BUT WAS USED AS A PLACEHOLDER FOR INPUTTING INTO THE CTS. THIS CERTIFICATE NEEDS IT OWNS PROGRAM CODE. THANKS, MKB

### Rationale:

There is community interest in the post-MSN certificate in the area of concentration, namely Psychiatric Mental Health Nurse Practitioner. All courses are currently approved and offered in the CON.

**Program Approval:**

Department Curriculum Authority:	<input type="text" value="Colleen Taylor"/>	Date	<input type="text" value="2017/04/03"/>
Department Chairperson:	<input type="text" value="Karen Hoblet"/>	Date	<input type="text" value="2017/04/04"/>
College Curriculum Authority or Chair:	<input type="text" value="Colleen Taylor"/>	Date	<input type="text" value="2017/04/04"/>
College Dean:	<input type="text" value="Kelly Phillips"/>	Date	<input type="text" value="2017/04/04"/>
Graduate Council:	<input type="text" value="Constance Schall, GC mtg 5/2/17"/>	Date	<input type="text" value="2017/05/03"/>
Dean of Graduate Studies:	<input type="text"/>	Date	<input type="text"/>
Office of the Provost :	<input type="text"/>	Date	<input type="text"/>

**Administrative Use Only**

**Effective Date:**  (YYYY/MM/DD)

**CIP Code:**

**Subsidy Taxonomy:**

**Program Code:**

**Instructional Level:**

**Registrar's Office Use Only**

**Processed in Banner on:**

**Processed in Banner by:**

**Banner Program Code:**

**Banner Term Code:**