California State University, Long Beach

University Resources Council

Proposal for Program, Degree or Certificate **Discontinuance**

**Please attach this completed form to your proposal for program discontinuance.**

*Initiating Department(s):*

*College(s):*

*Name of Proposed Program:*

*Contact Person(s): Phone: Email:*

*Rationale for the discontinuance:*

*Impact on students currently enrolled:*

*Impact on faculty currently teaching in the program:*

*Impact on staff currently needed for program implementation:*

*Impact on space or other facilities currently used in the program:*

*Library Resources (Please indicate if the department/program librarian was notified about this discontinuance and briefly explain if applicable resources are being reallocated to continuing programs.):*