 REPORT OF AMENDED PROGRAM

Please complete the following form to report program amendments and email to [educatorprograms@michigan.gov](mailto:educatorprograms@michigan.gov).

Institution Name: Click here to enter text.

Endorsement Area and Code: Click here to enter text.

Date of Report: Click here to enter text.

Date of Most Recent Review and Approval: Click here to enter text.

Program Level:

|  |  |
| --- | --- |
| Approved Program | Amended Program |
| Elementary  Secondary  K-12 | Elementary  Secondary  K-12 |

Program Offering:

|  |  |
| --- | --- |
| Approved Program | Amended Program |
| Major  Group Major  Minor  Group Minor  Additional Endorsement | Major  Group Major  Minor  Group Minor  Additional Endorsement |

Number of Credits Offered for Each Program Option

|  |  |
| --- | --- |
| Approved Program | Amended Program |
| Click here to enter text. | Click here to enter text. |

Amended Program Start Date: Click here to enter text.

Amendments:

|  |  |  |
| --- | --- | --- |
| Course(s) Added | Course(s) Removed | Course(s) Replaced |
| **Detailed description and rationale of program changes, including the relationship between course changes and endorsement standards:**  Click here to enter text. | | |

Please attach relevant candidate advising sheets and/or catalog pages documenting the amendment.

Dean/Director Signature:

|  |
| --- |
|  |

*For Office of Professional Preparation Services Use:*

Amendment reviewed by: Click here to enter text. Date: Click here to enter text.

OPPS Remarks: Choose an item.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_