# Academic Program/Minor Teach-Out Monitoring Report

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| ***Date of Submission:*** | ***\*Due each December 15 & May 15 during the teach-out period.*** |

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| **College:** |  | **Dean:** |  |
| **Academic Degree/Minor Program:** |  | **Department Head:** |  |
| **Number of Majors in Program/Minor:** |  | **Program Coordinator:** |  |
| **Number of Enrolled Students this Semester:** |  | **Level of Program:** |  |
| **Number of Completers this Semester:** |  | **Total Credit Hours Required in Program/Minor:** |  |

|  | **Student ID** | **Student Name**  **(Last Name, First Name)** | **Student Signed Teach-Out Plan**  **(Date)** | **Credit Hours Earned to Date** | **Credit Hours to be Completed** | **Anticipated Student Completion**  **(Semester, Year)** | **Last Semester of Student’s Enrollment**  **(Semester, Year)** | **Actual Completion Date**  **(Semester, Year)** |
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| ***Additional***  ***Teach-Out Criteria:*** |  | |
|  |  |  |
| **Department Head** | **Signature** | **Date** |
|  |  |  |
| **Dean, College** | **Signature** | **Date** |
| ***\* Provost’s Office Acknowledgement:*** | | |