*State Council of Higher Education for Virginia*

proposal for Mission Statement change

COVER SHEET

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Institution | | | | |
| 2. Nature of Proposed Change (i.e., modify, expand, or new). Please indicate the change here. Attach a detailed description of the change as a separate document. Attach copies of the institution's current mission and resultant mission. | | | | |
| 3. Purpose of Proposed Change.Please indicate in a few words the reason for the change here or simply indicate “See attached.” Provide a detailed explanation of the rationale for the change as a separate document. | | | | |
| 4. Type of Proposed Change (check one). Part III must be completed for any change. | | | | |
| MODIFICATION  Please explain background for change, text changes to  mission, and how the change  fits with the current academic programming in a separate  document. | | EXPANSION  Please complete and  submit Part I of this  form. | NEW  Please complete and submit Part I and II of this form. | |
| 5. Date of last mission change (e.g., December 1, 2021): | | | | |
| 6. What was the nature of the last change? | | | | |
| MODIFICATION | EXPANSION | | | NEW |
| 7. Date of Approval by the Board of Visitors for the proposed change. (required) | | | | |
| 8. Proposed Effective-Date of Mission Change. (e.g., December 1, 2021) (required) | | | | |

Signed:       Date:

Title:       Phone: