# PROPOSAL SUMMARY AND ROUTING FORM

Proposal Title: Catering Management Certificate

Initiating Individual: Julie A. Doyle  Initiating Department or Unit: Sports, Entertainment & Hospitality Management

Contact Person's Name: Julie A. Doyle  Email: doylej@ferris.edu  Phone: 231.591.2385

☐ Group I-A – New Degree, major, concentration, minor, or redirection of a current offering

☐ Group I-B – Deletion of a degree, major, concentration, or minor

☐ Group II-A – New Course, modification of a course, deletion of a course

☐ Group II-B – Minor Curriculum Clean-up

☐ Group III – Certificate (☒ College Credit ☐ Non-credit ☐ New Certificate)

☐ Group IV – Other site location (☐ College Credit ☐ Non-credit)

<table>
<thead>
<tr>
<th>PLEASE PRINT AND SIGN YOUR NAME</th>
<th>DATE</th>
<th>VOTE/ACTION * Number Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Representative **</td>
<td>Julie A. Doyle 8/26/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>Department/School/Faculty</td>
<td>Lianne Briggs 8/26/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>Representative Vote **</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department/School Administrator</td>
<td>Lianne Briggs 8/26/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>College Curriculum Committee/Faculty</td>
<td>Amy Dorey 9/23/2015</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>UCC Representative</td>
<td>David Woman 10/14/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>Dean</td>
<td>David Woman 11/10/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>University Curriculum Committee **</td>
<td>☑ 11/19/15</td>
<td>☑ Support 8-0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>Senate **</td>
<td>✗ 11/24/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
<tr>
<td>Academic Affairs</td>
<td>Frank O'Connell 11/30/15</td>
<td>☑ Support 0 Support with Concerns 0 Not Support 0 Abstain</td>
</tr>
</tbody>
</table>

* Support with Concerns or Not Support must include identification of specific concern with appropriate rationale.

** Number Count must be given for all members present and/or voting.

To be completed by Academic Affairs

Date of Implementation: Fall 2016

President (Date Approved)  Board of Trustees (Date Approved)  Academic Officers of MI (Date Approved)

VPAA  NOV 24 2015  PROVOST
1. Proposal Summary: (Summary is generally less than one page. Briefly state what is proposed with a summary of rationale and highlights)

Off-premise catering is facing increasing demands in today's industry to address the elevated expectations of meeting and event professionals. To provide opportunities for success in this specialized area of food and beverage management, the Hospitality Management Program is proposing a certificate in Catering Management.

The courses offered for this certificate all currently exist and by providing a certificate attached to this specialized collection, we will attract enrollment from our current campus students and non-traditional students within the Big Rapids and Grand Rapids area communities. We have also received multiple requests from community colleges and career technical centers to provide this offering for their culinary arts and culinary management students interested in pursuing education for managing their own catering services company.

2. Summary of Curricular Action (Check all that apply to this proposal)

☐ Degree    ☐ Major    ☐ Minor    ☐ Concentration    ☑ Certificate    ☐ Course
☐ New    ☐ Modification    ☐ Deletion

Name of Degree, Major, etc.: Click here to enter text.

3. Summary of All Course Action Required: Click here to enter text.

A. Newly Created Courses to be Added to the Catalog

 Prefix: Number
Click here to enter text. Click here to enter text. Title
Click here to enter text.

B. Courses to be Deleted from FSU Catalog

 Prefix: Number
Click here to enter text. Click here to enter text. Title
Click here to enter text.

C. Existing Courses to be Modified

 Prefix: Number
Click here to enter text. Click here to enter text. Title
Click here to enter text.

D. Addition of existing FSU courses to program

 Prefix: Number
Title
HSMG 127 Principles of Cooking and Baking
HSMG 211 Purchasing for F&B Operations
HSMG 215 Hospitality Cost Controls
HSMG 226 International Cuisine & Culture
HSMG 228 Banquet Management
HSMG 292 HSMG Internship I
HSMG 300 Guest Service Management

E. Removal of existing FSU courses from program

 Prefix: Number
Title
Click here to enter text. Click here to enter text.

4. Summary of All Consultations

Form Sent (B or C)  Date Sent  Responding Department  Date Received & By Whom
Form B  August 26, 2015  SEHM  8/26/2015 L Briggs

5. Will External Accreditation be sought? (For new programs or certificates only)

☐ Yes    ☑ No

If yes, name the organization involved with accreditation for this program. Click here to enter text.
6. Is a PCAF required? ☐ Yes ☒ No Is the PCAF approved? ☐ Yes ☒ No (If yes, supply link on Academic Affairs website where PCAF is posted.)

7. Program Checksheets affected by this proposal (Check all that apply to this proposal)
   ☐ Add Course ☐ Delete Course ☐ Modify Course ☐ Change Prerequisite ☐ Move from required to elective
   ☐ Move from elective to required ☐ Change Outcomes and Assessment Plan ☐ Change Credit hours

8. List all Checksheets affected by this proposal:
   College: Business
   Department: Sports, Entertainment & Hospitality Management
   Program: Catering Management Certificate
To be completed by each department affected by the proposed change, addition, or deletion. Potential duplication of coursework is reason for consultation.

1. This completed form must be forwarded with the proposal to the administrator of the department to be consulted.

2. The department must respond within 10 business days of receipt of this form to insure inclusion in the final proposal. The completed original is returned to the Academic Senate office to be inserted into the proposal and a copy is returned to the initiator.

   The department must acknowledge receipt of this form and the proposal in writing to the initiator.

   Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

3. The Proposing Department must address any concerns raised by the consulted department. This response must be in writing and will be included in the proposal following the original consultation form.

RE: Proposal Title: Catering Management Certificate

Initiator(s): Julie A Doyle
Proposal Contact: Julie A Doyle Date Sent: August 26, 2015
Department: SEHM Campus Address: WCO 106
(Please type)

Responsing Department: SEHM
Administrator: Lianne Briggs Date Received: 8/29/2015 Date Resumed:

Based upon department faculty review on (date), we

☐ Support the above proposal.
☐ Support the above proposal with the modifications
☐ and concerns listed below. Do not support the proposal for the reasons listed below.

Comment regarding the impact this proposal has on current curriculum including prerequisites, scheduling, room assignments, and/or faculty load for your department. Use additional pages, if necessary.
FLITE SERVICES CONSULTATION FORM

To be completed by the liaison librarian and approved by the Dean of FLITE. FLITE must return the original form to the Academic Senate office to be included in the proposal and a copy to the initiator. FLITE must respond within 10 business days of receipt of this form to insure that the form is included in the final proposal.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

RE: Proposal Title:

Projected number of students per year affected by proposed change:

Initiator(s): Julie A. Doyle
Proposal Contact: David Scott
Date Sent: 9/15/15

Department: SEHM
Campus Address: WCO 106

Library Librarian Signature: ___________________ Date Received: 9/16/15

Dean of FLITE Signature: ___________________ Date Returned: 9/21/15

Based upon our review on 9/16/15, FLITE concludes that:

☐ Library resources to support the proposed curriculum change are currently available.

☐ Additional Library resources are needed but can be obtained from current funds.

☐ Support, but significant additional Library funds/resources are required in the amount of $__________.

☐ Does not support the proposal for reasons listed below.

Comment regarding the impact this proposal will have on library resources, collection development, or other FLITE programs. Use additional pages if necessary.
Checklists

MAJOR, MAJOR WITH CONCENTRATION, MINOR OR CERTIFICATE CHECKSHEET(S)

Certificate Student Learning Outcomes:

1. Student will be able to manage catering business operations.
2. Student will be able to meet industry standards in service and operations.
Department Chair: ____________________________  
Date: ________________  
Advisor: ____________________________  
Date: ________________  
Student: ____________________________  
Date: ________________  

**NOTE:** A 2.00 GPA is required for completion of this certificate.

Students who return to the university after an interruption of enrollment (excluding summer sessions) must normally meet the requirements of the curriculum which are in effect at the time of their return, not the requirements which were in effect when they were originally admitted.

Students who return to the university after an interruption of enrollment (including summer sessions) must normally meet the requirements of the curriculum.

**NOTICE REGARDING WITHDRAWAL, RE-ADMISSION AND INTERUPTION OF STUDIES**

**Required Information:** Please contact the Hospitality Programs Office (331) 567-8902.

**NOTE:** Not more than 50% of the credits in this certificate may be transferred from another institution, nor will this certificate be granted if more than 50% of the certificate credits are required in the student's major.

<table>
<thead>
<tr>
<th>Select two of the following courses &amp; credits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course Title</strong></td>
</tr>
<tr>
<td>Guest Service Management</td>
</tr>
<tr>
<td>International Cuisine &amp; Culture</td>
</tr>
<tr>
<td>Hospitality Cost Controls</td>
</tr>
<tr>
<td>Purchasing for Food Operations</td>
</tr>
</tbody>
</table>

**Note:** Some course titles and credits may be different depending on the department's approval.

**Required Courses - 9 credits**

<table>
<thead>
<tr>
<th>Required Course Title</th>
<th>[ ] Pre-reqs. Shown in Brackets</th>
<th>[ ] Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering Management Certificate</td>
<td>25 credits Required</td>
<td></td>
</tr>
<tr>
<td>Sports, Entertainment &amp; Hospitality Management Department</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ferris State University - College of Business</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**FORM D PROPOSED**
<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall Semester</td>
<td>HSMG 211</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 226</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 228</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 225</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td>Summer Semester</td>
<td>HSMG 226</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG</td>
<td>220 or 300</td>
<td></td>
</tr>
</tbody>
</table>

**Suggested Schedule for Catering Management Certificate**

<table>
<thead>
<tr>
<th>Semester</th>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall Semester</td>
<td>HSMG 225</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 226</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 211</td>
<td>Choice</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>HSMG 228</td>
<td>Choice</td>
<td>3</td>
</tr>
</tbody>
</table>

**First Year**

**Second Year**
FORM FIN

To be completed by the Director of Financial Aid (DFA). The DFA must return the original form to the Academic Senate Office to be inserted in the proposal and a copy to the initiator. The DFA must respond within 10 business days of receipt of this form to ensure that the form is included in the final proposal.

Failure to respond by 10 business days of receipt of this form is interpreted as support for the proposal.

RE: Proposal Title: Catering Management

Initiators: Julie A Doyle

Proposal Contact: Julie A Doyle

Date Sent: 9/15/15

Department: Sports, Entertainment, & Hospitality Management

Campus Address: WCO 106

Director of Financial Aid Signature: _____________________________ Date Returned: 9-15-15

Please check all that apply:

_____ The new program is remedial as it prepares students for study at the postsecondary level. This program is not an eligible program per Federal requirements; therefore students in this program are not eligible to receive financial aid.

_____ The new program is considered a preparatory program as it prepares a student for a given program, i.e., they do not meet the academic criteria to be admitted into the program. Students in this program are not eligible to receive financial aid.

_____ The new program is a certificate program. Certificate programs are not eligible programs per Federal requirements; therefore students in this program are not eligible to receive financial aid.

_____ The new program is a teacher certification program where it provides coursework required for a professional State credential necessary for employment as an elementary or secondary school teacher, but for which the institution awards no academic credential. Students are eligible for Federal Direct Loans only at an undergraduate level.

_____ The new program is a teacher certification program that will award a certificate credential. Certificate programs are not eligible program per Federal requirements; therefore students in this program are not eligible to receive financial aid.

_____ The new program is a Bachelor Completion program; a two-year degree completion program that requires an associate degree or the successful completion of at least two years of college coursework as a prerequisite for admission. These are aid eligible programs and students may receive financial aid.

_____ The new program is a Master's, Professional, or Doctoral Degree/Major program that allows students to take some undergraduate courses where some deficiency exists. Please note, students are eligible to receive Federal loans for the program, but undergraduate courses will not be included in the total credit count to determine loan eligibility. Students must be half time (Graduate/Professional= 5 credits, Doctoral = 3 credits) in graduate level courses to receive Federal aid.

_____ The new program is an Associate's, Bachelor's, Master's, Professional, or Doctoral Degree/Major and is conferred upon graduation. Per Federal requirements, these are aid eligible programs and students may receive financial aid.

Please include the number of credit hours to earn the degree or credential being sought. This is required as it must be reported to the Department of Education as well as the National Student Loan Clearinghouse, regardless if students are receiving federal aid.

Credits Required to Earn Degree: _____________________________

Revised 4/30/14 ed
Hi Julie,

Your proposal for a new certificate in Catering Management, Proposal #16-036 was approved by UCC on Thursday, November 19. Your proposal has been forwarded to Academic Affairs for their approval. Congratulations!

Kemi
Olukemi Fadayomi, Ph. D
Professor of Biology
Faculty-in-Residence, Faculty Center for Teaching & Learning
Chair, University Curriculum Committee
Ferris State University
ASC 2009, 820 Campus Drive
Big Rapids, MI 49307-2225

fadayok@ferris.edu
Phone: (231) 591-5628
Fax: (231) 591-2540