

## PROPOSAL TO DISCONTINUE A DEGREE PROGRAM

**Proposals will only be accepted electronically as a Word document to the Office of the Provost when submitted to [provost.deg.changes@wsu.edu](mailto:provost.deg.changes@wsu.edu)**

Degree Title:	[Hospitality Business Management]
Academic Program:	[BA]
Academic Plan:	[ ]
Number of Credits:	[120]
Department(s) or Program(s):	School of Hospitality
Campus(es):	[Tri-Cities]
College(s):	[Carson College of Business]

Contact Name:	[Kate McAteer]	Email Address:	[kmcateer@wsu.edu]
Contact Phone:	[509-372-7371]	Proposed effective date:	[12-31-2025]

<p><b>Rationale for discontinuing the degree:</b></p> <p>[The program has only graduated 6 students in the last 5 years. Discontinuation of the BA in Hospitality Business Management will result in the sunseting of the WBBM program.]</p>
<p><b>Implications for currently enrolled students? Include the number of students who will be affected. A <b>teach-out plan is also required as an attachment.</b></b></p> <p>[There are no students currently certified in the major. There are four students taking the HBM minor and 2 taking the WBBM minor. These students can complete their requirements with global campus courses or videoconferencing from other campuses. One freshman and one sophomore have HBM as their academic interest. These students will be advised to certify in the BA Business Administration with option to complete the HBM minor.]</p>

**Attach the teach-out plan.**

<p><b>Explain how the decision to discontinue the degree was reached; how specifically <u>all</u> faculty and staff were notified, engaged in the decision, and given the opportunity to provide feedback.</b></p> <p>[The campus conducted an academic portfolio review with rpkGroup in 2023 analyzing data from four consecutive academic years (AY 19, 20, 22, 22). The faculty had representation on the steering committee that worked with the consultants to ensure data was accurate and put in context for certain scenarios. The consultant held town halls with all faculty to get feedback on the study. The campus institutional researcher used the same strategies to collect data for AY 23 and 24. These data were shared with faculty in faculty meetings. Both the VCASA and VCFA have attended faculty meetings to discuss the project and receive feedback.]</p>
<p><b>Describe how the discontinuation may impact other degree programs, departments, colleges, or campuses. How will the impact be accounted for?</b></p>

[The two faculty in the program teach across the system. One of them is retiring in May. The other will continue to teach HBM and marketing courses required for the BA BA. The home department in Pullman will need to cover instruction that will be lost for system courses with TC as the originating site.]

If applicable, describe how the respective external stakeholders (e.g., advisory or alumni groups) were consulted in this decision:

The academic portfolio review data was shared with the campus advisory council and their feedback was included in the decision-making process. The campus has an advisory group for CCB but it is currently inactive.

**SIGNATURES: The names typed below certify that the relevant academic and campus officials have reviewed and approved this proposal:**

Chair or Director Signature:		Date:	8-11-25
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Dean Signature:		Date:	8/11/2025
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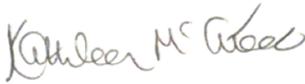
*Signatures are required from all Chancellors (or delegates). A signature denotes endorsement if the degree will be offered and/or impact the respective campus. A signature will also denote receipt of notification if the degree is not being offered and/or will impact the respective campus. If needed, a signature abstention box is provided immediately below.*

Everett Chancellor Signature:		Date:	8/19/25
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Global Chancellor Signature:		Date:	8/19/25
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Pullman Chancellor Signature:		Date:	
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Spokane Chancellor Signature:		Date:	
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Tri-Cities Chancellor Signature:		Date:	8-8-2025
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Vancouver Chancellor Signature:		Date:	8/19/25
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Comments regarding abstention of signature(s)

**Submit completed form as a Word document to the Provost's Office at [provost.deg.changes@wsu.edu](mailto:provost.deg.changes@wsu.edu)**

Provost's Office Signature:		Date:	
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For Registrar's Office Use Only:

Current CIP Code:		New CIP Code:		Date:	
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