

COURSE CHANGE PROPOSAL

*Completed forms must be returned to the chief academic officer by* ***October 1*** *to be considered for board approval.*

Date Initiated: Click here to enter text. Administrator’s Name: Click here to enter text.

Department and School: Click here to enter text.

Course Name: Click here to enter text.

Request:  New Course  New Course Name  Course Revision  Remove Course

Credits: Click here to enter text. *Check if honors:*

Recommended Prerequisites (if any): Click here to enter text.

Rationale: Explain why this course is needed. (If this is a course removal or name change, only fill out this section.)

Click here to enter text.

Proposed Course Description: In three or four sentences, write a course overview.

Click here to enter text.

Content Standards and Benchmarks: List the primary content standards and benchmarks students will be expected to understand and be able to apply as a result of taking this course. (Attach additional documents as needed.)

Click here to enter text.

Scope and Sequence: Outline the planned structure for the course, including a tentative timeline for instruction. (Attach additional documents as needed.)

Click here to enter text.

Cost Associated with the Course: Estimate the costs involved in offering this course. List desired texts and materials on a separate sheet. Also list and explain other needs.

|  |  |
| --- | --- |
| 1. Teaching Staff: $Click here to enter text. | 1. Facilities/Space: $Click here to enter text. |
| 1. Textbooks/Kits: $Click here to enter text. | 1. Professional Learning: $Click here to enter text. |
| 1. Supplementary: $Click here to enter text. |  |