## OFFICE OF CURRICULUM AND INSTRUCTION



## **Course Proposal Form**

Pro	roposed Course Title:	_		
Scl	chool Building:	Department:		
Grade Level:  Course Length:		Credits: Meeting Frequency:		
Pre	rerequisites (if applicable):			
1.	<b>Rationale:</b> (provide a brief description of student/so student outcomes.)	chool needs/purpose of course, benefits, and anticipated		
2.	Course Description: (Short descriptive paragraph has offering catalog.)	ighlight the major focus of course. To be used for course		
3.	Course Text(s) / Readings / Materials: (Include text) information.)	. computer/technology tools, and supplementary		
4.	Major Course Requirements: (List major projects, a	ssessments, etc.)		
5.	Course Topics Outline: (Course outline which include	es the major topics and concepts.)		
6.	<b>District / Common Core Learning Standards (CCLS)</b> addressed throughout the course of study.)	for Course: (Identify all standards and benchmarks		

		PERTINENT INFORMATION					
	A.	This course will be: (please check one)					
		An addition to the department's offering					
		A replacement for					
	A pilot study						
	B. This course will require (please check the following appropriate spaces)						
	The adoption of a new textbook (Submit a minimum of two suggested textbooks for review)  The use of a text previously adopted and in use						
	C. This course will require (please check appropriate spaces)						
	Specialized organization of teacher time						
		Specialized room arrangement or equipment (explain b	below)				
		Specialized student grouping or sectioning					
		Curriculum planning time					
		Specialized technology					
F	Financial Import (first year)						
		Added Personnel	How Many	Cost per professional	Total Cost		
	Prof	essional					
	Non	-Professional (Teaching Assistants, etc.)					
	ļ	added Materials (include name of textbook, publisher and	How	Cost per	Total Cost		
		edition to be reviewed for at least two textbooks)	Many	textbook	Total Cost		
	1)						
	2)						
	3)						
	4)						
	5) 6)						
	Supp	olies					
		Added Equipment (ex. Technology or software)	How Many	Cost/item	Total Cost		
F		ial Impact: (Provide an explanation of projected costs for perso went years.)	onnel, ma	nterials, and equ	ipment for		

11. To what extent does this course conflict with the content and/or student availability of other courses in your

(Explain)

department?

12. To what extent does this course conflict with courses	offered in other departments?
13. What course(s) could be deleted if this curriculum ch	ange is adopted?
<b>14. This proposed course must be discussed with other n</b> (Briefly describe the outcome of these discussions.)	nembers of your department prior to submitting this form.
15. Explain how this course will correlate with the Distric	ct's Long Range Plan (BCEPT Plan).
16. If approved, this course will begin: (semester/year)	
Submitted by: (please print)	Signature:
	Date:
DISTRICT	Γ REVIEW
Principal Approval: (please print)	Signature:
	Date:
Comments:	
Director of Curriculum & Instruction:	Signature:
	Date:
Comments:	
Deputy Superintendent Approval:	Signature:
	Date:
Board of Education Approval Date (if applicable):	Date: