

MOUNTWEST COMMUNITY & TECHNICAL COLLEGE

PREPARING CURRICULUM PROPOSALS INSTRUCTIONS

Draft your proposal in accordance with the following guidelines by completing the Curriculum Proposal Form. Should any item under the several headings not pertain to your proposal, simply indicate N/A. Number the second and subsequent pages of your proposal.

Supply the preliminary information about your proposal as follows:

- **PROPOSAL NUMBER:** Leave this space blank. A number will be assigned the proposal by the Executive Vice President and Chief Academic Officer.
- **DIVISION:** Enter the name of the Division (e.g., *Liberal Arts and Transfer Studies*) and Program (e.g., *A.A.S. in Early Childhood Education*) and/or Subject Area (e.g., *Math*).
- **PREPARER/CONTACT PERSON:** Enter the name of the person who prepared the proposal and his/her telephone extension number.
- **DATE SUBMITTED:** Enter the date on which you are forwarding the completed proposal to the Division Dean.
- **REVISION SUBMISSION DATE:** If changes are required to the original proposal, enter the date the proposal was resubmitted.
- **IMPLEMENTATION DATE REQUESTED:** Enter the first day of the semester (or summer term) and year in which the proposed curriculum change would take effect.

COMPLETING YOUR CURRICULUM PROPOSAL: Complete the Curriculum Proposal Form and the appropriate appendix. For further details, please see the “Preparing Curriculum Proposals Checklist” on the following page.

- **NEW COURSE:** Complete and attach Appendix 1.
- **COURSE REVISION:** Complete and attach Appendix 2.
- **NEW PROGRAM/CONCENTRATION:** Complete and attach Appendix 3.
- **PROGRAM REVISION:** Complete and attach Appendix 4.

PRINTING INSTRUCTIONS: When printing your proposal, please omit any unnecessary pages. Do not include this page of instructions.

Print beginning with the page entitled “CURRICULUM PROPOSAL” and delete any appendix that is not used. Only include the appendix/appendices that is/are part of your curriculum proposal.

**PREPARING CURRICULUM PROPOSALS
CHECKLIST**

- A. Attaching appendices. If you have multiple curriculum changes, attach as many “Appendix” forms as necessary. FOR INSTANCE, if there are multiple new courses, please attach as many “Appendix 1” forms as necessary. Copy and paste the “Appendix 1” form to create multiple copies and then fill out each accordingly.
- B. Creation of new course(s). For each new course, complete and attach Appendix 1.
- N/A Appendix 1 – Attached
- C. Revision of course content. For each course revision, complete and attach Appendix 2. Include a revised course description, written in complete sentences, suitable for use in the college catalog.
- N/A Appendix 2 – Attached
- D. Other changes to existing course(s) such as changes to title, course number, and elective or required status. For each course revision, complete and attach Appendix 2.
- N/A Appendix 2 – Attached
- E. Creation of new programs(s). For each new program, complete and attach Appendix 3.
- N/A Appendix 3 – Attached
- F. Revision of program content. For each program revision, complete and attach Appendix 4. Include a revised program description, written in complete sentences, suitable for use in the college catalog.
- N/A Appendix 4 – Attached
- G. Should this proposal affect any course or program in another department/division/ articulation agreement/MOAs, a memo must be sent to the head of each department/ division/school impacted. In addition, a copy of the memo(s) must be included with this proposal.
- N/A Attached copy of memo(s)
- H. Printing and submitting the Curriculum Proposal. *Delete unnecessary pages.*
- Exclude the page of instructions and the checklist when printing
- Delete unnecessary appendices
- Delete blank tables
- Delete any blank pages
- Resize tables to eliminate excessive white space

CURRICULUM PROPOSAL

Proposal Number:	
Division:	
Program:	
Preparer/Contact Person:	
Telephone Extension:	
Date Submitted to Dean:	
Date Submitted to the Curriculum Committee:	
Revision Submission Date:	
Implementation Date Requested:	

- | | |
|--|--|
| <input type="checkbox"/> New Course – <i>Appendix 1</i> | <input type="checkbox"/> New Program/Concentration – <i>Appendix 3</i> |
| <input type="checkbox"/> Course Revision – <i>Appendix 2</i> | <input type="checkbox"/> Program Revision – <i>Appendix 4</i> |

I. PROPOSAL. Write a brief abstract, not exceeding 100 words, which describes the overall content of the proposal.

II. DESCRIPTION OF THE PROPOSAL. Indicate which of the following actions are involved in the proposal, and describe how each is involved. Include how this proposal affects the hours needed to complete this program. Specifically, what is the net gain or loss in hours?

A. Deletion of course(s) or credit(s) from program(s) ... ***DELETE if N/A***

Course(s) affected:			
Current hours:	Proposed hours:	Net loss in hours:	

B. Addition of course(s) or credits(s) to programs(s) ... ***DELETE if N/A***

Course(s) affected:			
Current hours:	Proposed hours:	Net gain in hours:	

- C. Include an itemized summary of the program(s) affected, if any, and of the proposed changes(s). Include how this proposal affects the hours needed to complete this program. Specifically, what is the net gain or loss in hours? ... **DELETE if N/A**

Program(s) affected	Proposed change(s)	Net gain or loss in program hours

- D. Use of course(s) with program(s)/articulation agreements/MOAs ... **DELETE if N/A**

Programs/articulation agreements/MOAs affected	Use of course(s)

- III. ASSESSMENT.** Indicate the types of assessment data, i.e., surveys, interviews, capstone courses, projects, licensure exams, a nationally normed test, locally developed measurements, accreditation reports, etc., that were collected and analyzed to determine that curricular changes were warranted.

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- IV. RATIONALE FOR THE PROPOSAL.** Based upon the assessment data listed previously, indicate why a curricular change is justified. Indicate the expected results of the change. Be sure to include an estimate of the increased cost, or reduction in cost, of implementation. FOR EXAMPLE: Will new faculty, facilities, equipment, or library materials be required?

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Dean sends 1 signed hard copy and 1 electronic copy to Curriculum Committee Chair

Signatures*
(Please sign in blue ink)

Program Chair		Date	
Division Dean		Date	
Curriculum Committee Chair		Date	
Executive Vice President		Date	
President		Date	
Registrar		Date	
*When all signatures have been acquired, please return form to Executive Vice President for processing.			
<input type="checkbox"/> Original to Executive Vice President <input type="checkbox"/> Copy to Registrar <input type="checkbox"/> Copy to Division Dean of Origination <input type="checkbox"/> Copy to Military Services			

APPENDIX 1 – REQUEST FOR NEW COURSE
Please complete and attach this form if requesting a new course.

1. Designate the course number, title, units of credit, prerequisites (if any), and specify its status as an elective or required course.

Course number:	
Title:	
Credit hours:	
Prerequisites:	
Course status:	<input type="checkbox"/> Elective <input type="checkbox"/> Required

2. Has the alpha designator been approved by the Registrar’s Office? Select all that apply.

Yes No
 Graded CR/NC Pass/Fail

3. Include a course description, written in complete sentences, suitable for use in the college catalog.

4. Include the course outcomes.

Upon completion of this course, the student will be able to:

1.

5. List the general education outcomes. Check all that apply.

Communicate effectively using written skills
 Communicate effectively using oral skills
 Apply quantitative reasoning appropriate to the degree
 Use critical thinking skills
 Apply ethical reasoning
 Utilize technology as it is relevant to the degree
 Identify appropriate intercultural interaction

6. Include a detailed *course outline* consisting of at least two levels. **FORMATTING:** *Model the template below for your course outline. Insert additional levels (subtopics) as needed.*

TEMPLATE: *Please delete and replace this sample outline with your course outline before submitting your proposal.*

- I. Main Topic #1 ... (*LEVEL 1*)
 - A. Subtopic #1 ... (*LEVEL 2*)
 - 1. (*LEVEL 3*) ... *Optional*
 - 2. *etc.*
 - B. Subtopic #2
 - C. *etc.*
- II. Main Topic #2
 - A. Subtopic #1
 - B. Subtopic #2
 - C. *etc.*
- III. Main Topic #3
 - A. Subtopic #1
 - B. Subtopic #2
 - C. *etc.*
- IV. *etc.*

ADDITIONAL TIPS:

- The “Main Topics” should align with your course level objectives (course outcomes) and the “subtopics” listed should support the corresponding “Main Topic.”
- There must be at least 2 “Main Topics.” (These “Main Topics” are the first level of the two-level course outline.)
- For each “Main Topic,” there should be at least 2 supporting subtopics. In other words, if there is an “A,” then there must also be a “B.” (These “subtopics” are the second level of the two-level course outline.)

APPENDIX 2 – REQUEST FOR COURSE REVISION
Please complete and attach this form if requesting a course revision.

1. Other changes to existing courses such as changes to title, course number, and elective or required status ... **DELETE SECTION if N/A**

a. Current course information

Course number:	
Title:	
Credit hours:	
Prerequisites:	
Course status:	<input type="checkbox"/> Elective <input type="checkbox"/> Required

b. Proposed course information

Course number:	
Title:	
Credit hours:	
Prerequisites:	
Course status:	<input type="checkbox"/> Elective <input type="checkbox"/> Required

2. Revision of course content. Include a revised course description, written in complete sentences, suitable for use in the college catalog ... **DELETE SECTION if N/A**

a. Revision to course description

Current course description	Proposed course description

b. Revision to course outcomes

Current course outcomes	Proposed course outcomes
Upon completion of this course, the student will be able to: 1.	Upon completion of this course, the student will be able to: 1.

3. List the general education outcomes. Check all that apply.

- Communicate effectively using written skills
- Communicate effectively using oral skills
- Apply quantitative reasoning appropriate to the degree
- Use critical thinking skills
- Apply ethical reasoning
- Utilize technology as it is relevant to the degree
- Identify appropriate intercultural interaction

APPENDIX 3 – REQUEST FOR NEW PROGRAM/CONCENTRATION

Please complete and attach this form if requesting a new program.

1. Designate the program status, title, suggested CIP code, effective term, and new course(s) required (if any).

Program Status:	<input type="checkbox"/> New Associate Program <input type="checkbox"/> New Certificate Program <input type="checkbox"/> New Concentration
Program Title:	
Suggested CIP Code:	
Effective Term:	
New Course(s) Required:	<input type="checkbox"/> N/A <input type="checkbox"/> Appendix 1 – Attached for each new course required

2. Include a program description, written in complete sentences, suitable for use in the college catalog.

3. Include a needs assessment for the proposed program revision.

Need	Justification

4. Include a proposed curriculum. Please italicize new courses ... **Leave “Semester to be taken” blank if N/A**

Course	Title	Credits	Semester to be taken

5. List the program coordinator and/or faculty with credentials needed to support this program.

Program Coordinator	Credentials
Other Faculty Needed	Credentials

6. Include a list of advisory committee members.

Advisory Committee Members	Credentials/Justification

7. If the proposed program requires additional faculty, equipment, specialized materials, library resources, or facilities, complete the following table with an estimation of money and time needed to secure those items. ... **Leave blank if N/A**

Additional Requirements	Justification	Anticipated Cost	Time Required to Secure Item

8. Attach a copy of correspondence sent to other departments/divisions describing the proposed program.

Attached copy of correspondence

9. If there are any agreements required to provide clinical experience, attach details and signed agreements.

N/A

Attached details and copy of signed agreements

APPENDIX 4 – REQUEST FOR PROGRAM REVISION
Please complete and attach this form if requesting a program revision.

1. Other changes to existing program(s) such as changes to the program status, title, suggested CIP code, effective term, and new course(s) required (if any) ... **DELETE SECTION if N/A**

a. Current program information

Program Status:	<input type="checkbox"/> Associate Program	<input type="checkbox"/> Certificate Program
Program Title:		
Suggested CIP Code:		
Effective Term:		
New Course(s):	<input type="checkbox"/> N/A	<input type="checkbox"/> Appendix 1 – Attached for each new course
Course Revision(s):	<input type="checkbox"/> N/A	<input type="checkbox"/> Appendix 2 – Attached for each course revision

b. Proposed program information

Program Status:	<input type="checkbox"/> Associate Program	<input type="checkbox"/> Certificate Program
Program Title:		
Suggested CIP Code:		
Effective Term:		
New Course(s):	<input type="checkbox"/> N/A	<input type="checkbox"/> Appendix 1 – Attached for each new course
Course Revision(s):	<input type="checkbox"/> N/A	<input type="checkbox"/> Appendix 2 – Attached for each course revision

2. Revision of program content. Include a revised program description, written in complete sentences, suitable for use in the college catalog ... **DELETE SECTION if N/A**

a. Revision to program description

Current program description	Proposed program description

b. Revision to program curriculum

- 1) Include the current program curriculum ... **Leave “Semester” blank if N/A**

Course	Title	Credits	Semester to be taken

- 2) Include the *proposed program curriculum changes*. Please italicize newly created courses ...
 Leave “Semester to be taken” blank if N/A

Deleted Course(s)	Title	Credits	Semester to be taken
Added Course(s)	Title	Credits	Semester to be taken

3. Include a *needs assessment* for the proposed program revision.

Need	Justification

4. List the *current program coordinator and/or faculty with credentials* needed to support this program ... **DELETE SECTION if N/A**

<i>Current</i> Program Coordinator	Credentials
<i>Current</i> Faculty Needed	Credentials

5. List *changes to the program coordinator and/or faculty* needed to support this program ... **DELETE SECTION if N/A**

<i>Proposed</i> Program Coordinator	Credentials
<i>Changes to</i> Faculty Needed	Credentials

6. Include a list of current advisory committee members ... **DELETE SECTION if N/A**

Current Advisory Committee Members	Credentials/Justification

7. Include any changes to the advisory committee members ... **DELETE SECTION if N/A**

New Advisory Committee Members	Credentials/Justification

8. If the proposed program revision requires additional faculty, equipment, specialized materials, library resources, or facilities, complete the following table with an estimation of money and time needed to secure those items ... **DELETE SECTION if N/A**

Additional Requirements	Justification	Anticipated Cost	Time Required to Secure Item

9. Attach a copy of correspondence sent to other departments/divisions describing the proposed program revisions.

Attached copy of correspondence

10. If there are any agreements required to provide clinical experience, attach details and signed agreements.

N/A

Attached details and copy of signed agreements