

Salt Lake City School District
Academic Services
NEW COURSE APPLICATION FORM
Revised April 2012

Form can be found on the SLCS D Web Page
http://www.slcschools.org/departments/curriculum/documents/New-Course-Application_2012.pdf

Proposed course title: (Limit of 20 characters including spaces)

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Prerequisite(s): _____ Type of course: Core _____ Elective _____

Select A or B:

A. Full year _____ Amount of credit per year (1.0) _____

B. Semester _____ Amount of credit per semester (0.5) _____

Department: _____ Grade level(s): _____

Meets graduation requirement: _____
List specific area(s)

Starting with the graduation class of _____
(Year)

School year course number to be activated: _____

Proposed teacher: _____ Endorsement(s): _____

USOE course number _____ CTE CIP number _____

Required endorsement(s): _____

Complete this section only for a concurrent course number.

USOE Course Number: _____

College/University Name: _____

College/University Course Name: _____

Department: _____ Course Number: _____

Semester Hours: _____

1. What is the determined need for this course, and how was the need assessed? Cite data.

2. Describe the student needs being addressed by this course and the specific student target population.

3. How does this course correlate with the USOE core curriculum? Whether this is a core course or not, please describe how adding it to the Salt Lake City School District curricular offerings will improve student achievement.

4. Address how this course will impact overall school curriculum and resources relative to **scheduling; staffing and or/teaching assignments; class size across the department and/or school; teaching loads; impact on other courses; need for endorsements or special training requirements to maintain the course; additional funding needs; future academic support or courses.** Indicate how issues will be addressed.

5. Will there be an assessed fee for this course? (Fees must be approved by the SLCSDB Board of Education.)
 Yes _____ No _____

6. Will a student club be associated with this course? Yes ____ No ____

7. Is there an end-of-level USOE CRT test for this course? If so, which one?

Submitted by: _____

School: _____ **Date:** _____

Please note - According to Salt Lake City School District Policy IGA, “No subject or course shall be taught, no credit be given for the same, unless it has been recommended for approval by the Curriculum Department and authorized by the Board of Education.”

New course requests will not be considered without complete information and documentation. It is recommended a district-level curriculum coordinator be involved in the development of all new courses to ensure USOE standards for course development are followed.

Include in this application (or attach) complete information and documentation for the following:

COURSE DESCRIPTION FOR COURSE CATALOG

ESTABLISHED COURSE STANDARDS & OBJECTIVES

(For sample descriptions see the Utah State Office of Education core curriculum standards - <http://www.slk.k12.ut.us/depts/curr/resources/corecurriculum>)

COURSE OUTLINE

OPEN DISCLOSURE

(See Salt Lake City School District Board Policy IK)

COURSE MATERIALS

(textbooks, software, etc.)

COURSE ASSESSMENT & EVALUATION

(Describe multiple methods to be used for assessing student progress - such as authentic projects, performance tasks, portfolios, etc.).

Salt Lake City School and District Approval Signatures for

Proposed course title _____

Assistant Principal/Principal signature (date)

S.I.C. Chair signature (date)

S.C.C. Chair signature (date)

District Curriculum Coordinator

Date

Director, Academic Services

Date

Director, Career & Technical Education

Date

**Executive Director, Human Resources
For Endorsement Approval**

Date

Course number reviewed and approved:

Director of Student Information

Date

Course number completed

SIS Training and Operations Manager

Date