



Instruction, Curriculum and Student Services

**REQUEST FOR APPROVAL OF A NEW COURSE**

**Instructions for submission:**

Please print or type the following information and submit one form per course to the Content Area Facilitator. The Content Facilitator will submit to the Assistant Superintendent of Instruction, Curriculum and Student Services for final review.

**INCOMPLETE FORMS WILL NOT BE PROCESSED.**

General Information			
Course Title:		Subject Code/Content Area Abbreviation: (e.g. CE/SS = Economics/Social Studies) <b>Subject code calculates which high school graduation requirement the course satisfies first.</b>	
Suggested Course Code: (limit 10 characters – e.g. SC.BIOCHEM – please refer to course catalog)		<b>Subject Codes:</b>	
Starting Date:	Grade Level(s):	English=EN (1-8)	Amer Hist=AH      Civil Gov=CG
State/SCED Course Code: <b>Select the five-digit SCED code that best fits the course from the current SCED file spreadsheet link below.</b> <a href="http://nces.ed.gov/forum/SCED.asp">http://nces.ed.gov/forum/SCED.asp</a>		Soc Studies = SS	Algebra I=AG      Gen Math=MA
Length of Course ____ Quarter(s): <input type="checkbox"/> ____ Semester(s): <input type="checkbox"/>		Phys Science=PS	Biology=BI      Gen Science=SC
Credit per course: (e.g. 1 or 2 per sem)		Phys Educ=PE	Health=HL      Humanities=HU
Submit to NCAA: <input type="checkbox"/> *Please refer to NCAA for requirements.	School:	Econ=CE	Computer Ed=CM      Electives=EL
Practical Arts=PA (2017-2020)		Postsecondary Workforce Readiness=PW (2021+)	
Credit Type: Elective <input type="checkbox"/> Required Credit <input type="checkbox"/> <b>Specific Requirement(s) satisfied in this order :</b>		<b>Content Area abbreviation designates where the course will be listed in the online <a href="#">Secondary Course Catalog</a>.</b>	
Course Prerequisite (if none please state):			
Does the course replace or extend one already in existence?    Yes <input type="checkbox"/> No <input type="checkbox"/> If “yes” please explain			
Ideas and/or need for this course originated with:	Students: <input type="checkbox"/>	Department: <input type="checkbox"/>	Academic Staff: <input type="checkbox"/>
	Counselors: <input type="checkbox"/>	Individual Teacher: <input type="checkbox"/>	Other (specify):
<b>Brief</b> course description, as it will appear in the Course Catalog:			

Course Outline
<b>Attach a course outline that includes:</b>
I. Standards/Benchmarks./Performance Indicators
II. Assessment (Course, State, District, etc. [CSP, SWA, end of course, DALT, etc.]).
III. A. Content/Skills B. Instructional methods C. Materials/Resources
IV. Classroom Assessments
V. Interventions



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The **Submitter/Teacher**, I have read this course for approval.

Printed/Typed Name

\_\_\_\_\_  
Signature of Submitter/Teacher

\_\_\_\_\_  
Date

The **Department Chairperson**, after consultation with appropriate staff and the teachers who will teach the course:

RECOMMEND

DO NOT RECOMMEND

Printed/Typed Name

\_\_\_\_\_  
Signature of Department Chairperson

\_\_\_\_\_  
Date

**Comments:**

The **Principal**, after consultation with the department chairperson concerning the recommended course ensuring it meets standards, and:

RECOMMEND

DO NOT RECOMMEND

Printed/Typed Name

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

**Comments:**

The **Content Facilitator**, expressing the action of the Curriculum Committee:

RECOMMEND

DO NOT RECOMMEND

Printed/Typed Name

\_\_\_\_\_  
Signature of Content Facilitator

\_\_\_\_\_  
Date

**Comments:**

The **Assistant Superintendent or Designee**:

RECOMMEND

DO NOT RECOMMEND

\_\_\_\_\_  
Printed/Typed Name

\_\_\_\_\_  
Signature of Assistant Superintendent or Designee

\_\_\_\_\_  
Date

**Comments:**