Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
NURS 1610 Psychosocial Nursing, 2 credits

Date of Proposal: 8/18/2017  Author: CMortenson-Klimpel

Course Contact: CMortenson-Klimpel  Grading Method:  ■ Grade  □ Pass/Fail

Scheduling: ■ Fall  ■ Spring  □ Summer  □ Alternate Years  □ Variable  □ On Demand

Is this proposed course a Liberal Arts and Sciences course? □ Yes  ■ No

If yes, which MnTC area(s) will it fulfill (http://mtrn.org)?

■ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10

The course is being: ■ Modified  □ Deleted (complete Intention Form and obtain signatures)

Describe the modification and the rationale:
changing 3 competencies action verbs (3, 4, 5) to higher level from prior semester according to Bloom's taxonomy and based on feedback from ACEN mentor

Is this course a requirement/elective for a specific program or programs? ■ Yes □ No

If yes, which program(s)? Practical Nursing

— DARS search

What impact will this modified course have on other program(s)?

NONE

Attach additional paperwork if necessary

As Faculty Developer, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

Prior to Preparing Documentation
■ Initiation — idea was submitted to Department Chair(s) and Academic Dean/Director for discussion and support
■ Completed Intention Form

Continue the Curriculum Development Process
■ COPY of existing CCO was used to make changes
■ Double-checked:
  • concise 2-3 sentence course description  • course name  • lecture/lab credits and hour breakdown
  • course prefix and number  • prerequisites  • MnTC goal area—LAS courses
■ Completed MnTC Goal Area Cross-walk within WIDS (for LAS MnTC courses only)
■ Verified measurable course competencies and learning objectives
■ Considered potential opportunities and impacts of the change on other programs/departments — DARS Search
■ Proofread documentation for correct content and proper structure on CCOs based on SCC example
■ Proofread documentation for grammatical and typographical errors

If change in class maximum, Class Maximum Request Form completed (upload signed form in WIDS)

[Signature]  8/18/17  Date

Faculty Developer Signature

As Primary Department Chair, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):
■ Documentation through email and department meetings made available for other faculty and programs to provide feedback, includes MnTC Goal Area Cross-walk Template(s)
■ Proofread documentation for correct content and proper structure on CCOs based on SCC example
■ Proofread documentation for grammatical and typographical errors
■ I support this course  □ I do not support this course — please provide reason(s):

[Signature]  8/18/17  Date

Primary Department Chair Signature

Modify an Existing Course Form — 9/27/16 — Page 1
For LAS (MnTC courses) — As a LAS Department Chair, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

☐ LAS course (specifically MnTC courses), documentation through email and department meetings made available for other faculty and programs to provide feedback, includes MnTC Goal Area Cross-walk Template(s)

☐ I support this course  ☐ I do not support this course — please provide reason(s):

________________________________________

LAS Department Chair Signature  Date

☐ I support this course  ☐ I do not support this course — please provide reason(s):

________________________________________

LAS Department Chair Signature  Date

☐ I support this course  ☐ I do not support this course — please provide reason(s):

________________________________________

LAS Department Chair Signature  Date

If all 4 LAS Department Chairs do not support the modified course proposal, faculty developer can elevate the proposal to AASC for resolution.

As Academic Dean/Director, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

☐ Identified potential opportunities and impacts of the change on other programs/departments — DARS search
☐ Reviewed MnTC Goal Area Cross-walk Template (for LAS MnTC courses only)
☐ MnTC Goal Area is appropriate based on MnSCU guidelines — Transfer Specialist consulted
☐ Verified credentials for faculty teaching the course

If change in class maximum, Class Maximum Request Form completed (upload signed form in WIDS)

☐ I support this course  ☐ I do not support this course — please provide reason(s):

________________________________________

Academic Dean/Director Signature  08.20.2017

If Academic Dean/Director does not support the modified course proposal, faculty developer can elevate the proposal to AASC for resolution.

Upload this signed form as a PDF to WIDS Shared Document folder — Curriculum Committee.

Following Curriculum Committee support, this form is completed with final signatures.

________________________________________  10/16/2017

Curriculum Committee Chair Signature  Date

________________________________________  10/20/17

Vice President of Student and Academic Affairs Signature  Date
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
NURS 2350 Semester 2 Clinical Practice, 4 credits

Date of Proposal: 8/18/2017
Author: C. Mortenson-Klimpel

Course Contact: C. Mortenson-Klimpel
Grading Method: □ Grade □ Pass/Fail

Scheduling: ■ Fall □ Spring □ Summer □ Alternate Years □ Variable □ On Demand

Is this proposed course a Liberal Arts and Sciences course? □ Yes □ No
If yes, which MnTC area(s) will it fulfill (http://mntctransfer.org)?
□ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10

The course is being: ■ Modified □ Deleted (complete Intention Form and obtain signatures)

Describe the modification changing 2 competencies action verbs (11, 12) to higher level from prior semester according to Bloom's taxonomy and based on feedback from ACEN mentor

Is this course a requirement/elective for a specific program or programs? □ Yes □ No
If yes, which program(s)? Associate of Science in Nursing

— DARS search
What impact will this modified course have on other program(s)? NONE

Attach additional paperwork if necessary

As Faculty Developer, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

Prior to Preparing Documentation
□ Initiation — idea was submitted to Department Chair(s) and Academic Dean/Director for discussion and support
□ Completed Intention Form

Continue the Curriculum Development Process
□ COPY of existing CCO was used to make changes
□ Double-checked:
  • concise 2-3 sentence course description
  • course name
  • lecture/lab credits and hour breakdown
  • course prefix and number
  • prerequisites
  □ MntC goal area — LAS courses
□ Completed MnTC Goal Area Cross-walk within WIDS (for LAS MnTC courses only)
□ Verified measurable course competencies and learning objectives
□ Considered potential opportunities and impacts of the change on other programs/departments — DARS Search
□ Proofread documentation for correct content and proper structure on CCOs based on SCC example
□ Proofread documentation for grammatical and typographical errors

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As Primary Department Chair, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

☑ Documentation through email and department meetings made available for other faculty and programs to provide feedback, includes MnTC Goal Area Cross-walk Template(s)
☑ Proofread documentation for correct content and proper structure on CCOs based on SCC example
☑ Proofread documentation for grammatical and typographical errors
☑ I support this course □ I do not support this course — please provide reason(s):

Modify an Existing Course Form — 9/27/16 — Page 1
For LAS (MnTC courses) — As a LAS Department Chair, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

☐ LAS course (specifically MnTC courses), documentation through email and department meetings made available for other faculty and programs to provide feedback, includes MnTC Goal Area Cross-walk Template(s)

☐ I support this course  ☐ I do not support this course — please provide reason(s):

______________________________  __________________________
LAS Department Chair Signature  Date

☐ I support this course  ☐ I do not support this course — please provide reason(s):

______________________________  __________________________
LAS Department Chair Signature  Date

☐ I support this course  ☐ I do not support this course — please provide reason(s):

______________________________  __________________________
LAS Department Chair Signature  Date

If all 4 LAS Department Chairs do not support the modified course proposal, faculty developer can elevate the proposal to AASC for resolution.

As Academic Dean/Director, by signing this Modify an Existing Course form, the Curriculum Committee is assured of the following (check marks required):

☐ Identified potential opportunities and impacts of the change on other programs/departments — DARS search
☐ Reviewed MnTC Goal Area Cross-walk Template (for LAS MnTC courses only)
☐ MnTC Goal Area is appropriate based on MnSCU guidelines — Transfer Specialist consulted
☐ Verified credentials for faculty teaching the course

If change in class maximum, Class Maximum Request Form completed (upload signed form in WIDS)

☐ I support this course  ☐ I do not support this course — please provide reason(s):

______________________________  __________________________
Academic Dean/Director Signature  Date

If Academic Dean/Director does not support the modified course proposal, faculty developer can elevate the proposal to AASC for resolution.

Upload this signed form as a PDF to WIDS Shared Document folder — Curriculum Committee.

Following Curriculum Committee support, this form is completed with final signatures.

______________________________  __________________________
Curriculum Committee Chair Signature  Date

______________________________  __________________________
Vice President of Student and Academic Affairs Signature  Date

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