Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 1820, Coagulation, 2 cr

Date of Proposal: 1/18/2017
Course Contact: Stacy Hohenstein
Author: Stacy Hohenstein
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://mtrnsfer.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 prerequisite to enable students follow the proper course and sequence.

Is this course a requirement/elective for a specific program or programs? Yes No
If yes, which program(s)? Medical Laboratory Technician — DARS search
What impact will this modified course have on other program(s)? No other programs will be affected

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)

Faculty Developer Signature Date

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

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

Primary Department Chair Signature Date
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

Modify an Existing Course Form — 9/27/16 — Page 2
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 1825, Urinalysis/Body Fluids, 3 cr

Date of Proposal: 1/18/2017

Course Contact: Stacy Hohenstein

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://mtntransfer.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 prerequisite to enable students follow the proper course and sequence.

and the rationale:

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

If yes, which program(s)? Medical Laboratory Technician

— DARS search

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

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 prefix and number
  • course name
  • prerequisites
  • lecture/lab credits and hour breakdown
  • 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]
Faculty Developer Signature

1-18-17
Date

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]
Primary Department Chair Signature

1-18-17
Date
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  (1/8/2017)

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.

Curriculum Committee Chair Signature  2/3/2017

Vice President of Student and Academic Affairs Signature  2/8/2017

Modify an Existing Course Form — 9/27/16 — Page 2
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 1830, Hematology II, 3 cr

Date of Proposal: 1/18/2017

Course Contact: Stacy Hohenstein
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://mntransfer.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 prerequisite to enable students follow the proper course and sequence.

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

If yes, which program(s)? □ Medical Laboratory Technician

— DARS search

What impact will this modified course have on other program(s)? No other programs will be affected

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 prefix and number
  ■ course name
  ■ prerequisites
  ■ lecture/lab credits and hour breakdown
  ■ 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)

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):

Facility Developer Signature

Primary Department Chair Signature

Date
Date
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):

———

[Signature]  1-18-2017

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.

[Signature]  2/3/2017

Curriculum Committee Chair Signature  Date

[Signature]  2/13/2017

Vice President for 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)
MDLT 1835, Immunology, 2 cr

Date of Proposal: 1/18/2017

Author: Stacy Hohenstein

Course Contact: Stacy Hohenstein

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 prerequisite to enable students follow the proper course and sequence.

and the rationale:

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

If yes, which program(s)? Medical Laboratory Technician

— DARS search

What impact will this modified course have on other program(s)? No other programs will be affected.

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)

Facility Developer Signature

Date 1-18-17

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

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

Primary Department Chair Signature

Date 1-18-17
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 is 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):

__________________________  1-18-2017

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.

__________________________  2/3/2017

Curriculum Committee Chair Signature  Date

__________________________  2-8-17

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)
MDLT 2806, Immunohematology I, 2 cr

Date of Proposal: 1/18/2017
Author: Stacy Hohenstein

Course Contact: Stacy Hohenstein
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://mentransfer.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 prerequisite to enable students follow the proper course and sequence.
and the rationale:

Is this course a requirement/elective for a specific program or programs? □ Yes □ No
If yes, which program(s)? □ Medical Laboratory Technician
— □ DARS search

What impact will this modified course have on other program(s)?
□ No other programs will be affected

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]
Faculty Developer Signature
[Date] 1-18-17

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] 1-18-17
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):

______________________________ Date ______________________________
LAS Department Chair Signature  

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

______________________________ Date ______________________________
LAS Department Chair Signature  

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

______________________________ Date ______________________________
LAS Department Chair Signature  

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):

______________________________ Date ______________________________
Academic Dean/Director Signature

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.

______________________________ 2/3/2017 ______________________________
Curriculum Committee Chair Signature  

______________________________ 2/8/17 ______________________________
Vice President of Student and Academic Affairs Signature

Modify an Existing Course Form — 9/27/16 — Page 2
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 2807, Immunohematology II, 2 cr

Date of Proposal: 1/18/2017  Author: Stacy Hohenstein

Course Contact: Stacy Hohenstein  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 and the rationale:

Changing prerequisite to enable students follow the proper course and sequence.

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

If yes, which program(s)? Medical Laboratory Technician

— DARS search

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

No other programs will be affected.

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)

Faculty Developer Signature

Date

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):

Primary Department Chair Signature

Date
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):

t Identified potential opportunities and impacts of the change on other programs/departments — DARS search
t Reviewed MnTC Goal Area Cross-walk Template (for LAS MnTC courses only)
t MnTC Goal Area is appropriate based on MnSCU guidelines — Transfer Specialist consulted
vt 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 1-10-2017
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.

Modify an Existing Course Form — 9/27/16 — Page 2
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 2811, Microbiology I, 3 cr

Date of Proposal: 1/18/2017
Course Contact: Stacy Hohenstein
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://mtntransfer.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 prerequisite to enable students follow the proper course and sequence.
and the rationale:

Is this course a requirement/elective for a specific program or programs? ■ Yes □ No
If yes, which program(s)? Medical Laboratory Technician
— DARS search
What impact will this modified course have on other program(s)? No other programs will be affected

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 prefix and number
  * course name
  * lecture/lab credits and hour breakdown
  * 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)

Faculty Developer Signature 1-18-17

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):

Primary Department Chair Signature 1-18-17
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):

__________________________________________________________

[Signature] Date 1-18-2017

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.

__________________________________________________________

Curriculum Committee Chair Signature Date 2/6/2017

Date 2/3/2017

Vice President of Student and Academic Affairs Signature Date

Modify an Existing Course Form — 9/27/16 — Page 2
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 2818, Chemistry II 3 cr

Date of Proposal: 1/18/2017

Course Contact: Stacy Hohenstein

Author: Stacy Hohenstein

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://mctransfer.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 prerequisite to enable students follow the proper course and sequence.

and the rationale:

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

If yes, which program(s)? Medical Laboratory Technician

— DARS search

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

No other programs will be affected

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 prefix and number
  • course name
  • lecture/lab credits and hour breakdown
  • 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)

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):

Primary Department Chair Signature

1-18-17

Date
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):
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☐ 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

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______________________________  ___________________________
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.

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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
Curriculum Development Form — Modify an Existing Course

Course Designator, Number, Title and Number of Credits (i.e. ACCT 1800, Business Law, 3 cr)
MDLT 2821, Microbiology 3 cr Microbiology II 8A 2-3-17

Date of Proposal: 1/18/2017 Author: Stacy Hohenstein

Course Contact: Stacy Hohenstein 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://mntransfer.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 prerequisite to enable students follow the proper course and sequence.

and the rationale:

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

If yes, which program(s)? Medical Laboratory Technician

— DARS search

What impact will this modified course have on other program(s)? No other programs will be affected

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Prior to Preparing Documentation
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Continue the Curriculum Development Process
■ COPY of existing CCO was used to make changes
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  • lecture/lab credits and hour breakdown
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  □ Verified measurable course competencies and learning objectives
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If change in class maximum, Class Maximum Request Form completed (upload signed form in WIDS)

Faculty Developer Signature

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

Primary Department Chair Signature

1-18-17
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☐ I support this course □ I do not support this course — please provide reason(s):

_________________________ Date
LAS Department Chair Signature ___________________________

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

_________________________ Date
LAS Department Chair Signature ___________________________

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

_________________________ Date
LAS Department Chair Signature ___________________________

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☑ 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):

_________________________ Date
Academic Dean/Director Signature ___________________________

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_________________________ Date
Curriculum Committee Chair Signature ___________________________

_________________________ Date
Vice President of Student and Academic Affairs Signature ___________________________

Avoidance of overlap: 2/3/2017, 2/8/2017