

# Curriculum Development Form — Modify an Existing Course

12/4/15

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

MA 2040 Medical Assisting Internship

Date of Proposal: 9-29-15 Author: Cristen Cox

Course Contact: Cristen Cox 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: increasing course to 5 credits from 4 credits with incorporation of the MA HESI test prep to MA 2040

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

If yes, which program(s)? — DARS search Medical Assisting, AAS

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

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 Template (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

Cristen Cox

Faculty Developer Signature

9-29-15

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):

Cristen Cox

Primary Department Chair Signature

9-29-15

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.*

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**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

Addressed the need for Class Maximum Change Request form

No change in class maximum OR

Change in class maximum — Class Maximum Change Request form completed with all necessary signatures

I support this course

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

\_\_\_\_\_  
Academic Dean/Director Signature

09.30.2015

\_\_\_\_\_  
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.*

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

\_\_\_\_\_  
Curriculum Committee Chair Signature

12/4/15  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Vice President of Student and Academic Affairs Signature

12-7-15  
\_\_\_\_\_  
Date