Curriculum Development Form — Modify an Existing Course

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://mtransfer.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 Interset 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)? □ D

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

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

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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):

☐ 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
☐ 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.

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

Curriculum Committee Chair Signature Date 12/4/15

Vice President of Student and Academic Affairs Signature Date 12-7-15

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