

Class Maximum Request Form

This form should be used to request a class size for a new and/or existing course. The requestor must acquire the signature of all unlimited full-time and unlimited part-time faculty credentialed to teach the course.

Faculty Requestor Name: Michele Brielmaier **Current Date:** 5/10/2017

Course Designator, Number, and Title (i.e.: OTEC, 1820, Business English)
NURS 2240 Semester 1 Fundamental Concepts, 2 credit2

New Course Proposed Class Size: 40

Existing Course Current Class Size: _____ **Proposed Class Size:** _____

Existing Course: Submit three semesters of enrollment data (See Research, Planning & Grants Office or Registrar's Office):
 Semester 1 _____ Semester 2 _____ Semester 3 _____

Method of Delivery (circle appropriate) Face-to-Face Online Hybrid

Effective Semester (circle one): Fall FY20 17 Spring FY20__ Summer FY20__

Rationale for requested class maximum size

NURS 2240 is a new course from a credit change in NURS 2220 with increased credits from 1 to 2. The course delivery was done in a laboratory setting and found not to be suitable for the content. NURS 2240 will be a 2 credit hybrid course.

Instructional Cost Study for program/CIP code (Insert or Attach) (See Research, Planning & Grants Office, Vice President of Finance & Facilities, or Deans Office.):

CIP: 513801. MnSCU Ave State Appr. FY15 MnSCU Ave. Cost per FYE: 4,805. Floor: 4,325. Ceiling: 5,286. FY15 SCC Cost per FYE: 4,314. SCC below MnSCU ave. and Floor (lower band) related to lower enrollment and use of hybrid theory courses.

Faculty Signatures (All unlimited full-time and unlimited part-time faculty credentialed to teach the course. MSCF seniority roster can be found at <http://southcentral.edu/hr-a-college-relations/resources-a-forms.html> (if needed, add additional page))

Printed Name Annette Benson Signature Annette Benson Date: 5/10/17
 Printed Name Candace Mortenson-Klimpel Signature Candace Mortenson-Klimpel Date: 5/10/17
 Printed Name David Pletke Signature D. Pletke Date: 5-11-17
 Printed Name Elizabeth R. Thompson Signature Elizabeth Thompson Date: 5.11.17
 Printed Name Laurie Kodet Signature Laurie Kodet Date: 5-16-17
 Signature of Dean/Director Michele Brielmaier Date: 5.11.2017

Vice President of Student and Academic Affairs Office Use Only

VPSAA (Initial each area) Faculty Credentials Verified Instructional Cost Study Data Verified
 Signature of V.P. of Student and Academic Affairs [Signature] Date: 9-22-17

Following Shared Governance Approval

Signature of President _____ Date: _____

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Faculty Requestor Name: Michele Brielmaier **Current Date:** 5/10/2017

Course Designator, Number, and Title (i.e.: OTEC, 1820, Business English)
NURS 2455 Semester 3 Clinical Practice Specialty, 3 credits

New Course Proposed Class Size: 40

Existing Course Current Class Size: _____ **Proposed Class Size:** _____

Existing Course: Submit three semesters of enrollment data (See Research, Planning & Grants Office or Registrar's Office):
 Semester 1 _____ Semester 2 _____ Semester 3 _____

Method of Delivery (circle appropriate) Face-to-Face Online Hybrid

Effective Semester (circle one): Fall FY20 17 Spring FY20__ Summer FY20__

Rationale for requested class maximum size

NURS 2455 is a new course from a credit change in NURS 2450 with decreased credits from 4 to 3. Reduced credits and therefore clinical needed for the ASN program for the mental health and maternal child clinical experience.

Instructional Cost Study for program/CIP code (Insert or Attach) (See Research, Planning & Grants Office, Vice President of Finance & Facilities, or Deans Office.):

CIP: 513801. MnSCU Ave State Appr. FY15 MnSCU Ave. Cost per FYE: 4,805. Floor: 4,325. Ceiling: 5,286. FY15 SCC Cost per FYE: 4,314. SCC below MnSCU ave. and Floor (lower band) related to lower enrollment and use of hybrid theory courses.

Faculty Signatures (All unlimited full-time and unlimited part-time faculty credentialed to teach the course. MSCF seniority roster can be found at <http://southcentral.edu/hr-a-college-relations/resources-a-forms.html> (if needed, add additional page)

Printed Name	<u>Annette Benson</u>	Signature	<u>Annette Benson</u>	Date:	<u>5/11/17</u>
Printed Name	<u>Candence Mortenson-Klimpel</u>	Signature	<u>Candence Mortenson-Klimpel</u>	Date:	<u>5/10/17</u>
Printed Name	<u>David Pletke</u>	Signature	<u>David Pletke</u>	Date:	<u>5-11-17</u>
Printed Name	<u>Elizabeth R. Thompson</u>	Signature	<u>Elizabeth Thompson</u>	Date:	<u>5-11-17</u>
Printed Name	<u>Laurie Kodet</u>	Signature	<u>Laurie Kodet</u>	Date:	<u>5-16-17</u>
Signature of Dean/Director	<u>Michele Brielmaier</u>			Date:	<u>5.11.2017</u>

Vice President of Student and Academic Affairs Office Use Only

VPSAA (Initial each area) Faculty Credentials Verified Instructional Cost Study Data Verified
Signature of V.P. of Student and Academic Affairs [Signature] **Date:** 9-22-17

Following Shared Governance Approval

Signature of President _____ **Date:** _____

Printed Name Sandra Bosch Signature [Signature] Date: 5/11/17

Printed Name Jen Prochaska Signature [Signature] Date: 5-11-17

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

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Faculty Requestor Name: Michele Brielmaier **Current Date:** 5/10/2017

Course Designator, Number, and Title (i.e.: OTEC, 1820, Business English)
NURS 2560 Semester 4 Med Surg Advanced, 3 credits

New Course Proposed Class Size: 40

Existing Course Current Class Size: _____ **Proposed Class Size:** _____

Existing Course: Submit three semesters of enrollment data (See Research, Planning & Grants Office or Registrar's Office):
 Semester 1 _____ Semester 2 _____ Semester 3 _____

Method of Delivery (circle appropriate) Face-to-Face Online Hybrid

Effective Semester (circle one): Fall FY20 17 Spring FY20__ Summer FY20__

Rationale for requested class maximum size

NURS 2560 is a new course from a credit change in NURS 2530 with decreased credits from 4 to 3. Reduced credits needed for the ASN program for advanced med surg concepts. Competencies reduced.

Instructional Cost Study for program/CIP code (Insert or Attach) (See Research, Planning & Grants Office, Vice President of Finance & Facilities, or Deans Office.):

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Signature of Dean/Director Michele Brielmaier Date: 5.11.2017

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Signature of President _____ Date: _____