

Policy Series #: **4000.06-ACA (Academic Affairs)**

Type: Student College-wide Academic/Education

Name of Policy: **Maximum Class Size Policy and Procedure**

Purpose: Regulation that sets a reasonable maximum class size for all instruction at the college.

Applicability: The MSCF Master Agreement MnSCU (2011-2013) Article 11 (Work Assignments), Section 1. (All Teaching Faculty Workload Provisions), Subd. 11. (Class Size) states *“The administration at each college shall establish, through shared governance council, a regulation that sets a reasonable maximum class size for all instruction at the college. Once the regulation is established any change must be considered through the shared governance council at least one (1) semester in advance. However, by mutual agreement, between the college president (or designee) and the State MSCF, the one (1) semester notice for changing class size may be waived. There will be no intentional enrollment beyond the maximum class size unless agreed to by the MSCF and the administration. Under exceptional circumstances as determined by the affected faculty member, an instructor may admit two (2) additional students per section.”*

Definitions (if needed):

Does this policy have a procedure? Yes No

List related policies, procedures or plans here (if any): MSCF 2011-2013, Article 11, Section 1, Subd. 11

Procedure:

1. South Central College’s procedure for initial class maximum for each course begins at the department level with consensus among all Unlimited Full-time and Unlimited Part-time faculty members, in collaboration with the academic dean.
2. When courses are submitted to faculty shared governance for approval, courses should be submitted on the *Class Maximum Request Form*. (form can be found at <http://southcentral.edu/shared-governance/shared-governance.html>)
 - a. MnSCU credential field information can be obtained from Human Resources or the MSCF seniority roster. (MSCF seniority roster can be found at <http://southcentral.edu/hr-a-college-relations/resources-a-forms.html>).
 - b. Instructional Cost Study information can be obtained from any of the following: Research, Planning & Grants Office, Vice President of Finance & Facilities, or Deans Office.
3. All Unlimited Full-time and Unlimited Part-time faculty members with the appropriate MnSCU credential to teach the proposed course and the academic dean must sign this form. It is the responsibility of the faculty proposing the course class max to secure all required signatures.
 - a. For courses with no Unlimited Full-time and Unlimited Part-time faculty members in the Discipline, the appropriate Department Chair(s) must sign the form along with all the Unlimited Full-Time and Unlimited Part-Time faculty from the Division in which the Discipline belongs. In the case of a course from LAS this will include all four LAS Department Chairs and all the Unlimited Full-Time and Unlimited Part-Time faculty from the Division in which the Discipline belongs.
4. The Deans Office will forward the completed form to the Office of the Vice President of Student & Academic Affairs. All steps must be completed two weeks prior to the Shared Governance scheduled meeting.

5. The Vice President of Student & Academic Affairs verifies the faculty credential information and instructional cost study data by initialing the appropriate area on form.
 6. The Vice President of Student & Academic Affairs will forward this completed *Class Maximum Request Form* to Shared Governance Council for discussion and vote at the meeting.
 7. Placed on the Shared Governance Council meeting agenda for discussion and vote.
 8. Forward to the Office of the President for approval.
 9. Approved class maximum request(s) will be forwarded to the Registrar by the Office of the President.
 10. Class maximum requests not approved will be returned to the faculty originating the request for necessary correction by the Office of the Vice President of Student & Academic Affairs.
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Policy Owner: Shared Governance

Policy Owner Contact Number: (507) 389-7211

Date of Initial Review by President's Senior Cabinet: (Insert Date)

SG Review (if applicable): **Yes** **No** **N/A**

AASC Review (if applicable): **Yes** **No** **N/A**

Cabinet Review (if applicable): **Yes** **No** **N/A**

Date of Final Approval / Policy Adoption: (1-30-15 Shared Governance Approved)

Date & Subject of Revisions: Revised Policy Only (3-25-16 Shared Governance Approved)

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: _____ Current Date: _____

Course Designator, Number, and Title (i.e.: OTEC, 1820, Business English)

New Course Proposed Class Size: _____

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 _____ Spring FY20 _____ Summer FY20 _____

Rationale for requested class maximum size:

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

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 _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Signature of Dean/Director _____ Date: _____

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 _____ Date: _____

Following Shared Governance Approval

Signature of President _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

Printed Name _____ Signature _____ Date: _____

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