#### C:\Users\kfcoonjohn\Downloads\Copy of UAS SOE LOGO VERT COLOR.png

#### University of Alaska Southeast

#### UAS School of Education

#### ED S593 COURSE PROPOSAL FORM

#### Professional Level

**FOR OFFICE USE ONLY**

**Proposal Status:**

Original Amended

Submitted By: Date Submitted:

**Attachments:**

**Course Outline/Syllabus  Instructor Resume or Vita  Agenda**

**Course Title\***

**(\*Course title should be no longer than 23 characters, including spaces. Abbreviate if possible)**

**Semester Offered:** Spring Summer  Fall Year: \_\_\_\_\_\_\_

**Location of Class:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Building:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Room:** \_\_\_\_

**Sponsoring Agency:**

**Instructor Information:**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UA ID#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Coordinator Information:**

Name:

Address:

Phone:

Email:

Director Name (SHI Only):

**Request Online Registration and Instructions:**

"Online Registration Only"

**And/Or**

**Send Course Registration Packet to:  Instructor  Coordinator**

**Direct Contact (Lecture) Hours:**

**Note: There must be at least 12.5 Direct Contact (Lecture) Hours per credit.\***

***\*Don’t forget the 15 minute break for every 3 hour time block which cannot count as direct contact time.***

|  |  |  |
| --- | --- | --- |
| Date | **Times** | **Hours (A) \*** |
| *(example) Mon: 9/12/11* | *8 AM – 12 PM* | *3.75* |
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|  |  | **Total Hours:** |

**\*Note: Hours (A) total must match Content Topics Table, (A) Direct Contact (Lecture) Hours column total.**

**\*Note: These Hours (A) should also match the Agenda submitted with this proposal.**

**Below is the title and course description that will be visible to students and the public.**

**Final Assignment Due Date:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Full Course Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Course Description: (3-5 Sentences)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(A) Direct Contact (Lecture) Hours Description:**

**Note: There must be at least 12.5 Direct Contact (Lecture) Hours per credit.**

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| **Course Topics** | **(A)**  **Direct Contact**  **(Lecture)**  **Hours** |
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**Participant Total Hours/Credit:**

**(Minimum 12.5 Direct Contact Hours per credit)**

**One (1) Credit = Twelve & one-half (12.5) hours to twenty-four & one-half (24.5) hours**

**Two (2) Credits = Twenty-five (25) hours to thirty-seven (37) hours**

**Three (3) Credits = Thirty-seven & one-half (37.5) hours to forty-nine & one-half (49.5) hours**

**Class size:** Minimum: \_\_\_\_\_\_\_\_ Maximum:\_\_\_\_\_\_\_ No limit:  Closed Enrollment:

**Grading: *(Please note that all grades are due 5 days after the final date of the course)***

Pass/No Pass

Letter Grade

**Payment** Please check here if your organization will be paying for the registered students. To remit payment, please call UAS Student Accounts Office at 907-796-6267 after **all** students have been registered.

**Instructional Goals and Defined Outcomes:**

1. Knowledge or skills the students will have gained upon completing the course in 3-5 sentences.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Assessment of Student Performance (beyond attendance):**

2. How will students **demonstrate** that objectives were met?

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3. Describe the **products and performances** resulting from the teaching and learning activities.

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4. Describe how students will be expected to **integrate** the knowledge and skills they have gained in this course into their professional practice.

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5. For ED courses (per UAS Academic Catalog) **“students are expected to put in two hours of outside effort for every one hour in class in accordance with the standard Carnegie unit of credit.”** Describe the “outside effort” (i.e. homework, practice, implement, etc.) and hours (1 credit=25 hours, 2 credits=50 hours, and 3 credits=75 hours).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Reminder: Copies of course evaluations are to be provided to the University at the end of this course. Course syllabi are required to be submitted with this Course Proposal Form.**

Please email completed course proposal form to UAS a minimum of 2 weeks prior to start date of the course to ensure time to process through UAS system

|  |
| --- |
| ***UAS JUNEAU*** |
| *Nona Dimond* |
| *Executive Assistant to the Dean* |
| *11066 Auke Lake Way* |
| *Juneau, AK 999801* |
| *(907) 796-6050 Phone* |
| *(907) 796-6550 Fax* |
| [***nmdimond@alaska.edu***](mailto:nmdimond@alaska.edu?subject=ED%20593%20Proposal) |

***I acknowledge that the information provided on this form is true and correct to the best of my knowledge.***

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
   
Print name of Instructor/Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
  
Signature of Instructor/Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Determination:  Approved  Denied Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Director or designee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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