



Curriculum/Program Change Request

Administrative Procedure: 620.5

Date Adopted: 11/2/2007

Dates Reviewed: 2/23/2015

Section: 600 EDUCATION PROGRAMS

Date Revised: 5/29/2018

Proposal change: (check one)

	<u>Course Change</u>		<u>Program Change</u>
_____	Course to add	_____	Program to add
_____	Course to drop	_____	Program to drop.
_____	Course to restructure only	_____	Program to restructure
_____	Course to change title only		
_____	Course to restructure and meet Minnesota credit requirement for graduation		

To be completed by Initiator:

Course or program name: _____

Department: _____ Date: _____

Initiated by: _____

1. Describe your proposed new course/program offering or change. Attach academic standards for the course. (Are they state or national standards?) Attach specific objectives of the course. (How will these standards be assessed?) Attach the course description, syllabus of the course and curriculum map.

2. Describe why you see this as a needed change and how it will benefit the school district. (You should include how this supports the district's strategic plan and/or Minnesota's Academic Standards.) What data do you have to support this change? _____



MOORHEAD
AREA PUBLIC SCHOOLS

Independent School District 152

Probstfield Center for Education

2410 14th St. S., Moorhead, MN 56560 ■ Fax: 218-284-3333

www.moorheadschoools.org

■ Superintendent: 218-284-3330

■ Assistant Superintendent for Learning and Accountability: 218-284-3310

■ Human Resources and Operations: 218-284-3350

3. How will the course address different learning needs and bias issues? _____

4. If you are requesting the flexibility to restructure a course to meet Minnesota’s credit requirement for graduation, please include a course syllabus and curriculum map that embed the required standards.

Describe instructional materials to be used for instruction: _____

5. Describe how you plan to evaluate the proposed change: (The method you will see for program or course evaluation.) _____

6. Describe the effects this proposal will have on staffing, scheduling and building resources: _____



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Estimated Costs

	Initial	Ongoing
Instructional Materials	_____	_____
Capital Equipment	_____	_____
Facilities	_____	_____
Field Trips	_____	_____
Other	_____	_____

Initiator

Date

Department Chair

Date

Building Administrator

Date

Completed requests should be forwarded to the assistant superintendent for learning and accountability. There may be additional requests for information.