|  |
| --- |
| **State Use Only** |
| Ck #: | \_\_\_\_\_\_\_\_ | Date Rec’d: | \_\_\_\_\_\_\_\_ |
| Amt: | $\_\_\_\_\_\_\_ | PS: | \_\_\_\_\_\_\_\_ |
| Appl: | $\_\_\_\_\_\_\_ | Final: | \_\_\_\_\_\_\_\_ |



## PROGRAM/STAND-ALONE COURSE APPROVAL FORM

**(Must be typed)** Refer to [fee schedule](https://highered.colorado.gov/DPOS/Schools/feeschedule.html) for fees

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| --- |
| **School Information** |
| **School Name:**       | **Date:** MM/DD/YYYY |
| **Full School Address:** Street, City, State, Zip | **Phone:**       |
| **Person Submitting Application:**       | **Email:**        |
| **Program/Stand-Alone Course Information** |
| **Program/Course Title:**         |
| **Program** [ ]  | **Stand-Alone Course** [ ]  | **Type of Submission** (select one): | New [ ]  | Major Revision\* [ ]  | Minor Revision\* [ ]  |
| **If revision, previous name of program/course** (*if name did not change, indicate “****N/A****”*)       |
|  |
| **Total Program/Course Cost $**       | \*Please see Rule for definition of major revision and minor revision. |
| Reminder: If enrollment will increase due to this new/revised program/course, you may need to increase your surety coverage. |
|  |
| **Method of Delivery:** | Classroom Only: [ ]  | Online Only: [ ]   | Other: [ ]  (attach explanation of method of delivery) |
| **Maximum Student/Teacher ratio per Class:** | Theory:       | Lab:       |
| **Degree** [ ]  | **Certificate** [ ]  | **Diploma** [ ]  | **Advanced Training** [ ]  | **Continuing Education** [ ]  |
|  |
| **Expected Time Frame for Completion** (maximum time allowed for online education if applicable). Select all that apply: |
| [ ]  **Full Time**: (days/weeks/months or years - NOT HOURS):       |
| [ ]  **Part Time**: (days/weeks/months or years - NOT HOURS):       |
| **Program/Course Prerequisite(s)** |
| List the minimum requirement(s) to enroll in the **program/course** (i.e., educational credentials, license, course work,specialized training or expertise that is ***not*** an admission requirement for acceptance into the school). *If no prerequisite is required, please indicate* *“None”*:       |
| **Occupational Objective** |
| The objective of the program/course is to provide the occupational education, training and skills for:*name of occupation(s)*  |
|  |
| **The objective is** (select all that apply):[ ]  an entry-level employment opportunity[ ]  advanced-level employment opportunity[ ]  continuing education to enhance education of occupational areas as stated aboveCheck, *if applicable*:[ ]  Upon successful completion the graduate will be eligible to sit for the *name of licensure/certification exam* |
| **Attachments** |
| **The following items properly labeled and identified MUST be attached and become a part of the approval application:** |
| [ ]  Program/Course fee (see current [Fee Schedule](https://highered.colorado.gov/DPOS/Schools/feeschedule.html)). [ ]  A Course Syllabus **as instructed in Column A below**. (See Course Syllabus Sample for required components). [ ]  A Catalog or Catalog addendum reflecting curriculum change(s).[ ]  An Enrollment Agreement[ ]  Evaluator Reports\*\* [ ]  If major or minor revision, attach a Summary of the change(s). | [ ]  Externship agreement in compliance with Rule III.B.6, if applicable.**If not contained within the Course Syllabus:**[ ]  A complete physical inventory of equipment to be used for the course. [ ]  A list of textbooks used including titles, publishers, and copyright dates. [ ]  A list of reference materials used.[ ]  A list of teaching aids, materials and supplies used. |
|  |
| \*\*Evaluator Reports are NOT generally required for minor revisions. The Director reserves the right to submit minor revisions to the Board in which case evaluator reports may be requested. |
| **Program/Course Outline** |
| **A** |  **B** |  **C** |  **D** |  **E** |  **F** |
| **Program:*** List all courses in the Program.
* Attach a *Course Syllabus* for EACH course listed.

**Stand-Alone Course**:* List the subjects or topics in the course.
* Attach a *Course Syllabus* for the course.

 **(Press “Enter” in each column below for more rows)** | TheoryHours | LabHours | (*If applicable*)Internship/ExternshipHours | TotalContactHrs. **(B+C+D=E)** | (*If applicable*)Credit Hours:[ ] Semester *or*[ ] Quarter*or* Online Only:[ ] No. of Lessons |
|  |  |  |  |  |  |
|  **Subtotal** |  |  |  |  |  |
|  **Total** |  |  |  |  |  |