1. **General Information**

Submitted By: Click here to enter text. Date: Click here to enter a date. Building: Choose an item.

1. Current Program/Course Title: Click here to enter text. Current Course Code: Click here to enter text.
2. Grade Level(s): Click here to enter text. Department: Click here to enter text.
3. This program/course is (check all that are applicable):
4. [ ] Semester Long [ ] Year Long
5. [ ] Elective [ ] Required
6. [ ] Letter Graded [ ] Pass/Fail
7. [ ] Other (please specify): Click here to enter text.
8. Give a brief description of the program/course content as it should appear in the Course Description Guide or Course Catalog:

Click here to enter text.

1. **Request for Change to Current Course**
2. Describe the nature of the change requested.
* Change in prerequisites for current course
* Semester/yearlong change for current course
* Equivalency credit change (CTE only) for current course
* Name change for current course
* Deactivate a current course
* Other: Click here to enter text.
1. Describe in detail the specifics of the change:

Click here to enter text.

1. Rationale for the change:

Click here to enter text.

1. Are all applicable schools in agreement regarding the change?
* Yes
* No
* It has not been discussed with other schools.
1. Is there current or previous legislation that would be impacted by this change?
Click here to enter text.
2. If credit in a subject is changing, explain the impact for current and past scholars.

Click here to enter text.

1. Describe the professional development/training necessary to implement this change.

Click here to enter text.

1. Describe the communication plan for informing staff, students, and families about the change.

Click here to enter text.

1. Requested date for change to take effect.

Click here to enter text.

1. **Curriculum**
2. List any materials that are changing (with publisher and copyright) in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| Title (with publisher and copyright) | Quantity | Select Core or Supplemental | Select District, Transfer, or Building |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |
|  |  | Choose an item. | Choose an item. |

1. For new instructional materials not yet approved by the district, please complete **Appendices A and B**. If this is a new novel that is not on the approved book list, please submit a novel review request to the IMC along with this form.
2. What additional costs, initial or ongoing (such as professional development, copies, consumables, technology, etc.), do you anticipate in relation to this change and how will these costs be funded?

Click here to enter text.

1. **Course Outline**
2. For Priority Standard Submission, check one of the following:

[ ] Using existing Priority Standards. Please attach the standards that will be used.

[ ] Adding or Deleting Priority Standards specific to this course. Please complete **Appendix C**.

1. (If applicable.) If this course is outlined by one of the following programs, please check the appropriate box and attach the required paperwork:

[ ]  College Board Advanced Placement (AP): Attach course syllabus for audit and any additional supporting documents from College Board.

[ ]  International Baccalaureate (IB): Attach course syllabus from IB and any additional supporting documents.

[ ]  Cambridge International Examinations (CIE): Attach course syllabus from Cambridge and any additional supporting documents.

[ ]  Advancement Via Individual Determination (AVID): Attach any relevant documentation from AVID regarding course syllabi, outlines, or guides.

[ ]  Career and Technical Education (CTE): Attach course OSPI framework and any additional supporting documents.

**FOR OFFICE USE ONLY**

Content Facilitators: Please use the link below to fill out the form to input course code information ***before*** signing this paperwork. Please ensure that the course code request information matches the IMC request form.

<https://forms.office.com/r/G9LsTMY55B> *(Ctrl + click to make link work)*

1. **Required Signatures**

*Signatures indicate recommendation for approval of the course. If recommendation is for denial of the course, please note that in the signature space.*

Building Signatures Required from the Submitting School

1. Originator of Request (Required) Name: Click here to enter text.
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Principal (If originated at school level) Name: Click here to enter text.
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teaching for Learning Signatures

1. Content Facilitator (Required) Name: Click here to enter text.
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. TFL Director (Required) Name: Click here to enter text.
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Executive Director of Scholar Learning, Name: Erika Rudnicki
 Academic Programs, and Staff Development Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 (Required) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Chief Academic Officer (Required) Name: Dr. Melissa Spencer
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For TFL Department Use Only:
Final recommendation is for [ ] Approval [ ] Denial

7. Student Information Specialist (Required) Name: Emily Jacobs
 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR ITS USE ONLY**

**Course Code(s):**

**Other information:**

**Appendix A**

**Instructional Materials Purchase Request Evaluation Form for New Programs/Courses**

**General Instructions**

1. For *each* textbook being requested, please complete the following table.
2. If novels are being requested, please complete a Novel Review Form

**Title #1 Requested:** Click here to enter text.

|  |  |  |
| --- | --- | --- |
| **Title** | **Author** | **ISBN #** |
|  |  |  |
| ***Why is this text the best fit for the course? How does it align to the standards for the course and support instruction?***Click here to enter text. |
| ***Explain the process used to ensure cultural competency and lack of bias in the text?***Click here to enter text. |

**Title #2 Requested:** Click here to enter text.

|  |  |  |
| --- | --- | --- |
| **Title** | **Author** | **ISBN #** |
|  |  |  |
| ***Why is this text the best fit for the course? How does it align to the standards for the course and support instruction?***Click here to enter text. |
| ***Explain the process used to ensure cultural competency and lack of bias in the text?***Click here to enter text. |

**Title #3 Requested:** Click here to enter text.

|  |  |  |
| --- | --- | --- |
| **Title** | **Author** | **ISBN #** |
|  |  |  |
| ***Why is this text the best fit for the course? How does it align to the standards for the course and support instruction?***Click here to enter text. |
| ***Explain the process used to ensure cultural competency and lack of bias in the text?***Click here to enter text. |

**Appendix B**

**Instructional Materials Purchase Request Form for \*Changes in Programs/Courses**

**General Instructions**

1. Check with your school librarian/library clerk to see if the requested textbooks or materials are available from within the school district system. If so, utilize the Instructional Materials Transfer request form and request a transfer of books.
2. If not available, complete the following form for submission with the Full Change Form.

Requested By: Click here to enter text. Date: Click here to enter a date. Building: Choose an item.

Email: Click here to enter text. Phone: Click here to enter text.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Quantity** | **ISBN #** | **Title** | **Item Type** | **Unit Price *(For TFL Use)*** | **Total Cost*****(For TFL Use)*** |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |
|  |  |  | Choose an item. |  |  |

Requester’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*If this is an advanced program change, funds should come from the school’s advanced program budget.

**FOR TFL DEPT USE:**

Received: [ ] Approved \_\_\_\_\_\_\_ [ ] Denied \_\_\_\_\_\_\_\_\_

Notified\_\_\_\_\_\_\_\_\_\_ Ordered \_\_\_\_\_\_\_\_\_\_ Invoice Received \_\_\_\_\_\_\_\_\_\_ Process Completed \_\_\_\_\_\_\_\_\_\_

**Appendix C**

*You do not need to utilize all reporting standards (buckets) or priority standards. Most courses use 20-25 standards.*

|  |
| --- |
|  **Priority Standards Submission Form for Changes in Programs/Courses** |
| **Course Title** |  | **Grade Level(s)** |  |
| **School** |  | **Originator(s) of Course Change** |  |
| **Reporting Standard A:** |  |
| **Priority Standard** | **Link to WA State Standards (OSPI) or Program Standard #** | **Description (Gradebook Language)** |
| **A1** |  |  |
| **A2** |  |  |
| **A3** |  |  |
| **A4** |  |  |
| **A5** |  |  |
| **A6** |  |  |
| **A7** |  |  |
| **A8** |  |  |
| **Reporting Standard B:** |  |
| **Priority Standard** | **Link to WA State Standards (OSPI) or Program Standard #** | **Description (Gradebook Language)** |
| **B1** |  |  |
| **B2** |  |  |
| **B3** |  |  |
| **B4** |  |  |
| **B5** |  |  |
| **B6** |  |  |
| **B7** |  |  |
| **B8** |  |  |
| **Reporting Standard C:** |  |
| **Priority Standard** | **Link to WA State Standards (OSPI) or Program Standard #** | **Description (Gradebook Language)** |
| **C1** |  |  |
| **C2** |  |  |
| **C3** |  |  |
| **C4** |  |  |
| **C5** |  |  |
| **C6** |  |  |
| **C7** |  |  |
| **C8** |  |  |
| **Reporting Standard D:** |  |
| **Priority Standard** | **Link to WA State Standards (OSPI) or Program Standard #** | **Description (Gradebook Language)** |
| **D1** |  |  |
| **D2** |  |  |
| **D3** |  |  |
| **D4** |  |  |
| **D5** |  |  |
| **D6** |  |  |
| **D7** |  |  |
| **D8** |  |  |
| **Reporting Standard E:** |  |
| **E1** |  |  |
| **E2** |  |  |
| **E3** |  |  |
| **E4** |  |  |
| **E5** |  |  |
| **E6** |  |  |
| **E7** |  |  |
| **E8** |  |  |