COURSE PROPOSAL FOR CREDIT REVISION OR EQUIVALENCY CREDIT
FOR OCCUPATIONAL EDUCATION ONLY

Name: _______________________________ Date: __________________

School: _______________________________ Course Title: _________________

Proposed equivalency credit: _________________ # of Credits _______________

Graduation Requirement(s) this course will fulfill: _____________________________________________

Attach documentation to include the following:
1. Course Description
2. Course Outline and Course Competencies
3. Identification of EALR’s addressed
4. Identification of the application of EALR’s taught in the context of preparing for work.
5. Identification of the career specific competencies related to the industry.
6. Identification of how students will acquire information and experiences that provide knowledge of more than one career within their chosen pathway.
7. Identification of the skills and competencies related to employability and leadership skills.
8. Identification of how # 4 through #7 above will be assessed.

Curriculum or advisory committee responsible for this program/course: __________________________
(Attach minutes from the meeting approving the recommendation for equivalency credit.)

Committee Recommendation: ☐ Approval ☐ Denial

_________________________________________ _________________________
Principal Signature Date

Equivalency Credit Committee Review

Committee Members:
_________________________________________ _________________________
_________________________________________ _________________________
_________________________________________ _________________________

Committee Recommendation: ☐ Approval ☐ Denial

_________________________________________ _________________________
Signature of Program Administrator Date

☐ Approval ☐ Denial

_________________________________________ _________________________
Signature of Executive Director of Secondary Education Date

June 2002