



Mercer Island School District

# Course Proposal or Course Revision

For best results when filling out this form on your computer, download it first and open in Acrobat Reader.

New course proposals or substantial revisions to an existing course must be shared with the Learning Services Department before approval to assure communication between the school and district. This *Course Proposal or Course Revision Form* must be completed by January 31 for implementation for the following school year. The magnitude of the proposed course/program change should guide the amount of parent/community/school input needed.

## Description of Course Proposal or Program Change

School and person/team proposing course/program:

Course or program title: \_\_\_\_\_ Grade level: \_\_\_\_\_

Number of teachers likely to teach the class: \_\_\_\_\_

Anticipated number of students impacted (annually & over 5 years): \_\_\_\_\_

Briefly describe the proposed course or program change:

Why is this course/program being proposed? What student needs were identified that will be met by this proposal?

What Washington State Standards does the course meet?

What is the course/program content (proposed units of study)? What units of study will the course change or address?

Which graduation requirements will the course meet?

How does the course align with the Mercer Island School District [values, vision, mission, and fundamentals](#)?

What are some means through which students will demonstrate mastery of the learning targets?

What is the relationship of this course/program to other courses/programs in the department and school (pathways)?

**Course/Program Implementation and Evaluation**

Describe the staff development/training necessary to implement the program change:

What are the anticipated costs and sources of funds to support professional learning?

Describe the process for evaluating the course/program:

What instructional material needs will the course require?

**Communication Plan**

Describe the process used to obtain input from stakeholder groups: students, parents, other colleagues:

Principal's Signature of Approval: \_\_\_\_\_

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

Assistant Superintendent of Learning Services' Signature \_\_\_\_\_

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