



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: Occupational Ed/CTE credit for CTE Grad Pathway. Please list the CTE-certificated teachers who will be teaching the course and their certification area: _____

Attach documentation to include the following:

1. Course Description
2. Course Outline and Course Competencies
3. State and National content standards addressed in the context of preparing for living, learning, and working.
4. Identification of the industry-defined standards and how students will demonstrate the foundation and occupational skills.
5. Identification of how students will acquire information and experiences that provide knowledge of career options within the related pathway and career exploration.
6. Identification of the skills and competencies related to the KSD Learner Profile: employability skills and leadership skills.

Principal Signature

Date

Teaching and Learning Committee Review:

Committee Members:

<u>Name</u>	<u>School</u>	<u>Content</u>

Committee Notes:

Committee Recommendation:

Approval Denial

Director of CTE

Date _____

Approval Denial

Director of Secondary Education Date

Approval Denial

Assistant Superintendent of Teaching and Learning
