

Pilot Study Request

School _____ Date of request _____

Course title _____ Person/department requesting pilot _____

Starting date of course _____ Ending date of course _____

Grade level _____ Full year or Semester course

Who will teach the course? _____ Credit course? Yes No

Type of credit _____ Amount of credit _____

Please attach explanatory information on any of the following items that are checked YES.

- 1. Do the course objectives conform to the appropriate learning standards? Yes No
- 2. Is there currently a comparable course with similar objectives being taught at your school? Yes No
- 3. Does this course contain sensitive subject matter? Yes No
- 4. Will there be activities outside the classroom? Yes No
- 5. Does the course include on-site job experience? Yes No
- 6. Will the course include field trips for students? Yes No

Attach a statement addressing the following items:

- A. Course objectives and learning standards.
- B. Course outline.
- C. Proposed course materials.
- D. Start-up and long-term costs of the course (include projected funding source).
- E. Rationale for why the course is needed to address student needs.

Approval:

Building principal Date

Level Director Date

Assistant Superintendent of Teaching and Learning

Date