

COURSE PROPOSAL FOR CREDIT REVISION OR EQUIVALENCY -  
OCCUPATIONAL EDUCATION

**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 Career and College Readiness

\_\_\_\_\_  
Date

☐ Approval

☐ Denial

\_\_\_\_\_  
Director of Secondary Education

\_\_\_\_\_  
Date

☐ Approval ☐ Denial

\_\_\_\_\_  
Assistant Superintendent of Teaching and Learning

\_\_\_\_\_  
Date

☐ Approval ☐ Denial