

CURRICULUM COMMITTEE CHANGE COURSE FORM

Present your changed course to the Curriculum Committee by the last meeting of December for the course to be included in next year's catalog. Email the completed form to the Curriculum Office at least two weeks prior to the Curriculum Committee meeting. Also, submit signed copies to the Curriculum Office at least two weeks prior to the Curriculum Committee meeting, since signatures are required in advance of presenting your course.

SUBMIT THE COURSE OUTLINE ALONG WITH THIS FORM.

Intended Implementation Date:	2012 - 2013
1. Course Presenter:	Shelly Tracy
2. Course Department Division:	Energy & Utility Resource Management Department; Division of Regional Education Services
3. Course prefix, number and title of course:	ERM 108A Career Industry Marketing Strategies
4. Description for course change:	National Career Readiness Certificate (NCRC) is being added to the curriculum, and completing the portfolio and planning internships is being removed.
5. Reason for the course change:	To better reflect course content.
6. Is this course challengeable?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7. Is this course repeatable for a grade?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. Is this course able to be counted as repeated credits in a degree?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No _____ Up to how many credits can this course be repeated?
9. Curriculum Impact:	None
10. Overlap Impact:	None
11. External Impact:	None
12. Does this course belong on the Related Instruction list? If yes, which area:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Communication <input type="checkbox"/> Environmental Awareness <input type="checkbox"/> Computation <input type="checkbox"/> Safety <input type="checkbox"/> Human Relations <input type="checkbox"/> Physical Education/Health
13. Could this course be a part of any existing or developing Career Pathways certificate?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Instructor Signature and Date (Optional)

Shelly Tracy 12-15-11 Department Chair Signature and Date

Shun A. [Signature] 12-16-11 Dean Signature and Date