

AACC / PLP New Course Proposal

Course TITLE

Instructor name:

and contact information:

(email and/or phone)

Department name:

Department Phone:

Lifelong Learning

410-777-1184

The School of Continuing Education and Workforce Development

Part 1. This information is required by the College

Course Information

- Title:
- Course Number: [To be assigned. Leave blank]

Instructor Information

- Name:
- E-mail or other contact information:

Course Overview

- **Course description:** [**Recommended:** if 35 words or less, this can also serve as the “Brief Course Description” or, if less than 100 words, as the “Expanded Course Description” in Part 2 below.]

- **Course Outline:** [**Recommended:** organize by sessions]

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Learning Objectives

Required Course Materials

- Textbook: *(List full textbook information including publisher ISBN number and edition)*

- Other Materials and Supplies:

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Part 2. The additional information below is used by the PLP Curriculum Committee to review this course proposal.

Brief Course Description. [35 words or less in length. Will be used to describe your course in brochures and schedules published by the college. *If course description from Part 1 is 35 words or less simply write “SEE COURSE DESCRIPTION PART 1”*

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Expanded Course Description. [100 words or less. For publication on the AACC/PLP website. Building on the 35-word summary above, please describe key aspects of your course. *If course description from Part 1 is 35 words or less simply write “SEE COURSE DESCRIPTION PART 1”*]

Description of Class Sessions [If your “Course Outline” from Part 1 is arranged by class sessions and provides a brief description of each, simply write “*See Course Outline*” for this. *Otherwise, please provide a list of sessions with brief descriptions of each.*]

Class Sessions and Hours [Classes should not exceed 2 hours per session]

Number of Class Sessions ____ **Total Class Hours** ____ **Short Course? Y** ____ **N** ____

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Class Format Preference: [PLP courses can be *On-Campus* or *On-Line*. HyFlex (On-Campus plus simultaneous On-Line section) available. Please indicate your preference below.]

On-Campus Only _____ On-Line Only _____ Willing to do either _____

I am interested in doing HyFlex: Y _____ N _____

Class Size. [On-Campus courses restricted to 24. On-Line classes NOT restricted to 24. If your class is oversubscribed by 8 or more, you may offer a second section in the same term or offer to repeat the course in a subsequent term.]

Number for this class: _____ If there is a waiting list, I prefer to

Open a second section in the same term _____ Repeat the course later _____

Scheduling Preferences: [Once your course is approved, you will be contacted to request scheduling information (day(s) of the week, time, number of weeks). Class time blocks are 9:30-11:30am, noon-2:00pm and 2:30-4:30pm. Classes can be shorter than the 2-hours allotted.]

Facilitator information. [New facilitators: Please provide a brief statement, of 100 words or less, about yourself, including, for example, relevant educational and/or career background, or areas of interest; your PLP activities; and how you came to be interested in the topic of your course. This information will be published in the college brochure and on the AACC/PLP website. *Former facilitators: please update your biographical statement as needed.*]