

**WASHTENAW COMMUNITY COLLEGE
COURSE-SYLLABUS APPROVAL FORM (CSAF)**

For help screens, select a field and press F1

SECTION I. COURSE SUBMISSION INFORMATION

1. **Course:** (Enter proposed discipline, number & title here. If changing the number or title of an existing course, give old number or title in box 4 below.)
Discipline/No: BMG 174 **Title:** Business Co-op Education I

Division Code: BUS **Department Code:** BUSD **Effective Term:** Winter 2000 Do not publish in Time Schedule
 Do not publish in College Catalog

2. **Type of Approval:** (applies to both new courses and changes)
 Full Approval
 Conditional Approval

 This proposal previously received conditional approval for the Term: _____

3. **Reason for Submission:** This Course is being submitted for: (check all that apply)
 New Course Approval (Skip the rest of Section I and go directly to Section II.)
 Five-year Syllabus Review No changes to course
 Major Change(s)
 Minor Change(s) (If not due for review, submit sections I, II, and revised parts of Section III.)
 Reactivation of Inactive Course
 Inactivation (Submit Sections I and II only.)

4. **Change Information:** (Check all that apply. Make proposed changes in Section III, Course Syllabus.)

<p>Minor Changes</p> <input type="checkbox"/> Course Discipline/Number (was _____) <input type="checkbox"/> Course Title (was _____) <input type="checkbox"/> Course Description <input type="checkbox"/> Capacity (was: _____) <input type="checkbox"/> Pre or Corequisites <input type="checkbox"/> Course Objectives <input type="checkbox"/> Distribution of Contact Hours (contact hours were: lect: _____ lab _____ clin _____ exp _____) <input type="checkbox"/> Distance Learning - minor (Attach Preliminary Approval Form for Distance Learning & the Section Handout.) <input type="checkbox"/> Other _____	<p>Major Changes (Major changes will be reviewed by Curriculum Committee.)</p> <input type="checkbox"/> Credit hours (credits were: _____) <input type="checkbox"/> Core Elements: (Elements to be added: _____) (Elements to be removed: _____) <input type="checkbox"/> Grading <input type="checkbox"/> Course Objectives affecting core elements <input type="checkbox"/> Total Contact Hours (total contact hours were: _____) <input type="checkbox"/> Honors (Attach Honors Section Approval Form.) <input type="checkbox"/> Distance Learning - major (Attach Preliminary Approval Form for Distance Learning & the Student Handout for the Distance Section.) <input type="checkbox"/> Other _____
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5. **Rationale for changes:**

SECTION II. COURSE REVIEW INFORMATION AND SIGNATURES

1. **Department Review** (To be completed by department chair; if recommendation is no, initial and return to preparer with rationale attached.)

Will significant new resources be required? yes no (If yes, explain _____)
 Have departments that may be affected by this course been consulted? yes no (Explain N/A _____)
 Does the department support approval of this course? yes no

Print: Joseph Flack Faculty/Preparer Signature: [Signature] Date: 10/14/99

Print: _____ Department Chair Signature: [Signature] Date: 10/14/99

2. **Division Review** (To be completed by division dean; if recommendation is no, initial and return with rationale attached.)

Will significant new resources be required? yes no (If yes, have they been secured? yes no)
 Is this a curricular priority for your division? yes no (Comment Business Elective - Training _____)
 What is your estimate of projected enrollment? _____

Recommendation Yes No Bella H. Parker 10/14/99
 Division Dean's Signature Date

3. **Curriculum Committee Review** (Attach additional comments if necessary.)

Recommendation Yes No _____ _____
 Curriculum Committee Chair's Signature Date

4. **Vice President for Instruction and Student Services Approval** (Attach additional comments if necessary.)

Approval Yes No [Signature] 10/14
 Vice President's Signature Date

Data File: 11/11/99 ACS Code: 121 Catalog File Date: 11/10/99 CIF File Date: 11/9/99 OK
 Core Elements Approved: _____ New Syllabus Date: 10/14/99

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SECTION III. COURSE SYLLABUS

For help screens, select a field and press F1.

A. COURSE DETAILS (discipline # and title will automatically be entered in 1 and 2 below upon saving or previewing)

1. Course Discipline & No.: <u>BMG 174</u>		2. Course Title: <u>Business Co-op Education I</u>	
3. Course Description:			
4. Credit Hours: <u>1-5 Variable</u> If Variable credit, Give Range: <u> </u> to <u> </u> If repeatable for credit, how many times? <u> </u>		5. Class Capacity: <u>20</u> (If nonstandard, attach Class Capacity Exception form.)	6. Course Options: <input type="checkbox"/> Distance learning (Attach preliminary distance approval form and Section Handout.) <input type="checkbox"/> Honors (Complete Part G.) <input type="checkbox"/> P/NP Grading (Attach rationale.)
7. Contact Hours per Semester in: Lecture: <u> </u> Lab: <u> </u> Clinical: <u> </u> <u>varies(8-40)</u> Experiential: <u> </u> Total Contact Hrs: <u>Min120/Max600</u> (1)credit/(5)credit		8. Prerequisite(s): <u>Consent of Instructor</u> <u> </u> <u> </u>	9. Corequisite(s): (limit to 2) <u> </u> <u> </u>
10. a. Course Purpose: <input checked="" type="checkbox"/> Program Specialty <input type="checkbox"/> Program Support <input type="checkbox"/> Nonprogram Specialty <input type="checkbox"/> Transfer <input type="checkbox"/> Enrichment <input type="checkbox"/> Basic Skills		b. Is this course a requirement for a program? <input type="checkbox"/> Yes (specify the program(s) below) <u> </u> <u> </u> <input type="checkbox"/> No	c. Indicate schools to which you want Curriculum Services to send syllabus: (If transfer is approved, attach documentation.) <input type="checkbox"/> EMU <input type="checkbox"/> UM <input type="checkbox"/> Other <u> </u>

B. MAJOR INSTRUCTIONAL UNITS A major instructional unit is a grouping of topics that naturally relate to one another. List in order the major instructional units. Add additional numbers as needed.

1. CO-OP Work Experience – On site
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

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C. CORE ELEMENT INFORMATION

1. Core Element Submission Information: (Please check all that apply)

- This course has been previously approved for core elements. List currently approved core elements: _____
- Please review this course for core elements marked in part 2 below. (Mark only core elements being added or those needing review because of proposed major changes to the course.)
- This course does not meet any core elements. Explain _____

2. Proposed Core Element(s): (Mark the boxes of only the elements to be reviewed at this time. For detailed information on the criteria for determining whether a course meets a core element, refer to the Core Element Annotations in the Curriculum Manual.)

- | | |
|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> 1. To read and listen in a critical and perceptive way; to speak in an organized, clear, and effective manner. <input type="checkbox"/> 2. To use information sources and information gathering techniques; to cite sources when producing written communications. <input type="checkbox"/> 3. To develop, organize, and express thoughts in writing using Standard English. <input type="checkbox"/> 4. To apply basic mathematics through the level of elementary algebra. <input type="checkbox"/> 5. To represent and solve problems using mathematical techniques. <input type="checkbox"/> 6. To interpret elementary descriptive statistics. <input type="checkbox"/> 7. To comprehend and use concepts and ideas. <input type="checkbox"/> 8. To develop, express, test, and evaluate ideas. <input type="checkbox"/> 9. To analyze problems, develop solutions, and evaluate results in a clear, logical, and consistent manner. <input type="checkbox"/> 10. To distinguish between fact and opinion; to recognize biases and fallacies in reasoning. <input type="checkbox"/> 11. To use computer systems to achieve professional, educational, and personal objectives. <input type="checkbox"/> 12. To apply the protocols of computer use and respect the legal and other rights of individuals or organizations. <input type="checkbox"/> 13. To be aware of the artistic experience in personal and cultural enrichment, growth, and communication. | <ul style="list-style-type: none"> <input type="checkbox"/> 14. To be aware of the nature and variety of the human experience through the methods and applications of the humanities <input type="checkbox"/> 15. To understand the basic principles of scientific inquiry. <input type="checkbox"/> 16. To have a knowledge of basic human biological principles, including those related to wellness. <input type="checkbox"/> 17. To understand the basic principles of the natural sciences, and their relationship to the environment. <input type="checkbox"/> 18. To understand the basic principles and applications of technology. <input type="checkbox"/> 19. To understand the principle of integrating technological elements into systems. <input type="checkbox"/> 20. To understand the relationship of technology to individuals, society, and the environment. <input type="checkbox"/> 21. To understand the methods and applications of the social sciences in exploring the dynamics of human behavior. <input type="checkbox"/> 22. To understand those principles and values, including individual rights and civic responsibilities, which maintain and enhance democracy and freedom in a pluralistic society. <input type="checkbox"/> 23. To have a working knowledge of the history, structure, and function of American social, political, and economic institutions. <input type="checkbox"/> 24. To be aware of the contemporary global community, especially its geographical, cultural, economic, and historical dimensions. |
|--|--|

DIRECTIONS: Each core element marked above must be included in the appropriate core element boxes next to the course objectives in SECTION D which directly support that core element.

3. Courses That Partially Satisfy A Core Element In Combination With Other Courses:

- If this course is part of a combination of courses that together meet a core element, mark this box. The courses must all be submitted and reviewed together for core element approval.

Other course(s) required _____

Dean's Comments:

Curriculum Committee's Comments:

Vice President's Comments:

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D. INSTRUCTIONAL OBJECTIVES AND CORE ELEMENTS SUPPORTED

DIRECTIONS: (These Units should match those listed in Section B.) Use student outcome based language. (Example: The student will develop and support a thesis in an essay.) If the objective is being used to directly support a core element, write the core element number in the box to the right. If needed, additional information on how the core element is to be met and/or assessed for accomplishment can be included under the objective. If desired you may add a section of "overall course objectives" which are not associated with a specific unit. This may be particularly helpful for addressing core elements.

Unit Objectives

Core Elements

Unit #1

- | | | |
|-----|---|--|
| # 1 | The student with the instructor and employer will complete a Cooperative Education Work Agreement which will include hours fo work, location, rate of pay and specific assignments. | <input style="width: 60px; height: 30px;" type="text"/> |
| # 2 | Using the Student Learning Objectives Form, the student with the instructor and employer will complete a learning plan for the semester. This plan will include a minimum of three learning objectives and criteria for evaluation specific to the students work experience. | <input style="width: 60px; height: 30px;" type="text"/> |
| # 3 | Using the Student Report in a Cooperative Work Experience Form, the student will write a final report on the Co-op experience including the following item: <ul style="list-style-type: none">◆ A description of the assignment.◆ A summary of skills and abilities used on the job.◆ Ways in which coursework was integrated into job tasks.◆ An assessment of how well th eobjectives established at the beginning of the assignment were achieved.◆ Other reactions to and/or impressions of the experience. | <input style="width: 60px; height: 120px;" type="text"/> |

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E. INSTRUCTIONAL METHODS AND EVALUATION

1. Instructional Methods: (Check the appropriate boxes and describe as needed.)

- | | |
|---|---|
| <input type="checkbox"/> Lecture/Discussion _____ | <input type="checkbox"/> Field Trips _____ |
| <input type="checkbox"/> Clinical Instruction _____ | <input type="checkbox"/> Team Assignments _____ |
| <input checked="" type="checkbox"/> Self-Paced Learning _____ | <input type="checkbox"/> Telecourse _____ |
| <input type="checkbox"/> Internet Instruction _____ | <input type="checkbox"/> Video Seminar _____ |
| <input type="checkbox"/> Computer Simulations _____ | <input type="checkbox"/> Laboratory Assignments _____ |
| <input checked="" type="checkbox"/> On-Site Work Experience _____ | <input type="checkbox"/> Interactive TV _____ |
| <input checked="" type="checkbox"/> Other <u>Follow up by Instructor w/Student & Employer</u> | |

2. Evaluation Criteria:

- | | |
|--|--|
| <input type="checkbox"/> Attendance _____ | <input type="checkbox"/> Quizzes _____ |
| <input type="checkbox"/> Class Discussion _____ | <input type="checkbox"/> Tests _____ |
| <input type="checkbox"/> Papers _____ | <input type="checkbox"/> Midterm _____ |
| <input type="checkbox"/> Portfolio _____ | <input type="checkbox"/> Final Exam _____ |
| <input checked="" type="checkbox"/> Projects _____ | <input type="checkbox"/> Home Work _____ |
| <input checked="" type="checkbox"/> Reports _____ | <input type="checkbox"/> Presentations _____ |
| <input checked="" type="checkbox"/> Clinical/Work _____ | <input type="checkbox"/> Performances _____ |
| <input checked="" type="checkbox"/> Other <u>Faculty site visits(minimum/per student/semester)</u> | |

3. Attendance Requirements: (For Certification or nonevaluative purposes.)

F. EQUIPMENT, FACILITIES, TEXTS, MATERIALS, AND SUPPLIES

1. Special Equipment/Facilities : (Check the appropriate boxes and describe as needed.)

- | | |
|--|--|
| <input type="checkbox"/> Lab equipment _____ | <input type="checkbox"/> Testing Center _____ |
| <input type="checkbox"/> LRC Reserves _____ | <input type="checkbox"/> Student Competitions _____ |
| <input type="checkbox"/> Computers _____ | <input type="checkbox"/> Off-Campus Sites _____ |
| <input type="checkbox"/> CD ROM _____ | <input type="checkbox"/> Student Tutors _____ |
| <input type="checkbox"/> Field Trips _____ | <input type="checkbox"/> Distance Learning Classroom _____ |
| <input type="checkbox"/> Other _____ | |

2. Texts: (Please indicate if no text is required.)

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Title: None
 Author: _____
 Publisher: _____ Copyright Yr: _____
 Est. Cost: _____

Title: _____
 Author: _____
 Publisher: _____ Copyright Yr: _____
 Est. Cost: _____

Title: _____
 Author: _____
 Publisher: _____ Copyright Yr: _____
 Est. Cost: _____

Title: _____
 Author: _____
 Publisher: _____ Copyright Yr: _____
 Est. Cost: _____

Title: _____
 Author: _____
 Publisher: _____ Copyright Yr: _____
 Est. Cost: _____

Other Texts: _____

3. Supplies and/or Uniforms Student will have to Own or Acquire for Course:
 (e.g. calculators, uniforms, tools, and software, etc., excluding pen, pencil, paper, or textbooks.)

Descriptions	Cost Estimates
Will vary by employer & work position placement	

4. Reference Materials Students Will Use:
 (e.g. journals, books, manuals, maps, LRC reserves, etc.)

5. Audio/Visual and Computer Materials Students Will Use:
 (e.g. films, video tapes, slides, audio tapes, software, CDs, etc.)

Title	Source