

MASTER SYLLABUS

Course Discipline Code & No: HVA 130 Title: Electrical Systems and Illumination Effective Term Winter 2006

Division Code: \_\_\_\_\_ Department Code: WAFD: HVAC-R Org #: 14750

Don't publish:  College Catalog  Time Schedule  Web Page

**Reason for Submission.** Check all that apply.

- New course approval
- Three-year syllabus review/Assessment report
- Course change
- Reactivation of inactive course
- Inactivation (Submit this page only.)

**Change information: Note all changes that are being made. Form applies only to changes noted.**

- Consultation with all departments affected by this course is required.
- Course discipline code & number (was CON 079)\*  
\*Must submit inactivation form for previous course.
- Course title (was \_\_\_\_\_)
- Course description
- Course objectives (minor changes)
- Credit hours (credits were: \_\_\_\_\_)
- Total Contact Hours (total contact hours were: \_\_\_\_\_)
- Distribution of contact hours (contact hours were:  
lecture: \_\_\_\_\_ lab \_\_\_\_\_ clinical \_\_\_\_\_ other \_\_\_\_\_)
- Pre-requisite, co-requisite, or enrollment restrictions
- Change in Grading Method
- Outcomes/Assessment
- Objectives/Evaluation
- Other \_\_\_\_\_

**Rationale for course or course change. Attach course assessment report for existing courses that are being changed.**

This is the fifth course in a series of five courses used for benchmarking skills by the University of Michigan facilities management department.

**Approvals** Department and divisional signatures indicate that all departments affected by the course have been consulted.

**Department Review by Chairperson**  New resources needed  All relevant departments consulted

Print: L eslie R. Pullins Signature [Signature] Date: 1-5-07  
Faculty/Preparer

Print: W illiam H. Figg Signature [Signature] Date: 1-5-07  
Department Chair

**Division Review by Dean**

Request for conditional approval

Recommendation  Yes  No \_\_\_\_\_ Date: 1/5/07  
Dean's/Administrator's Signature

**Curriculum Committee Review**

Recommendation  Tabled  Yes  No \_\_\_\_\_ Date: 3/19/07  
Curriculum Committee Chair's Signature

**Vice President for Instruction Approval**

Approval  Yes  No  Conditional \_\_\_\_\_ Date: 3/28/07  
Vice President's Signature

Do not write in shaded area.  
Log File 1/5/07  Ecopy  Banner 3/30 C&A Database 3/30 C&A Log File 3/30 Basic skills  Contact fee

Please return completed form to the Office of Curriculum & Assessment and email an electronic copy to [john@wccnet.edu](mailto:john@wccnet.edu) for posting on the website.

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**\*Complete ALL sections which apply to the course, even if changes are not being made.**

Course: HVA 130	Course title: Electrical Systems and Illumination
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<b>Credit hours:</b> 2 If variable credit, give range: _____ to _____ credits	<b>Contact hours per semester:</b> <table style="width:100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center; border-bottom: 1px solid black;">Student</td> <td style="text-align: center; border-bottom: 1px solid black;">Instructor</td> </tr> <tr> <td>Lecture:</td> <td style="text-align: center;">30</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Lab:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Clinical:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Practicum:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>Other:</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td><b>Totals:</b></td> <td style="text-align: center;">30</td> <td style="text-align: center;">_____</td> </tr> </table>		Student	Instructor	Lecture:	30	_____	Lab:	_____	_____	Clinical:	_____	_____	Practicum:	_____	_____	Other:	_____	_____	<b>Totals:</b>	30	_____	<b>Are lectures, labs, or clinicals offered as separate sections?</b> <input type="checkbox"/> Yes - lectures, labs, or clinicals are offered in separate sections <input checked="" type="checkbox"/> No - lectures, labs, or clinicals are offered in the same section	<b>Grading options:</b> <input type="checkbox"/> P/NP (limited to clinical & practica) <input type="checkbox"/> S/U (for courses numbered below 100) <input checked="" type="checkbox"/> Letter grades
	Student	Instructor																						
Lecture:	30	_____																						
Lab:	_____	_____																						
Clinical:	_____	_____																						
Practicum:	_____	_____																						
Other:	_____	_____																						
<b>Totals:</b>	30	_____																						

**Prerequisites.** Select one:

- College-level Reading & Writing     
  Reduced Reading/Writing Scores (Add information at Level I prerequisite)     
  No Basic Skills Prerequisite (College-level Reading and Writing is not required.)

**In addition to Basic Skills in Reading/Writing:**

Level I (enforced in Banner)

Course	Grade	Test	Min. Score	Concurrent Enrollment <small>(Can be taken together)</small>	Corequisites <small>(Must be enrolled in this class also during the same semester)</small>
<input checked="" type="checkbox"/> REA 070	_____	Compass Reading	68	<input checked="" type="checkbox"/>	_____
<input checked="" type="checkbox"/> and <input type="checkbox"/> or MTH 067	_____	Compass Pre-Algebra	37	<input checked="" type="checkbox"/>	_____
<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	_____	_____	<input type="checkbox"/>	_____
<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	_____	_____	<input type="checkbox"/>	_____

Level II (enforced by instructor on first day of class)

Course	Grade	Test	Min. Score
<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	_____	_____
<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	_____	_____

**Enrollment restrictions** (In addition to prerequisites, if applicable.)

- and  or Consent required     
  and  or Admission to program required     
  and  or Other (please specify):  
 Program: \_\_\_\_\_

**Please send syllabus for transfer evaluation to:**

Conditionally approved courses are not sent for evaluation.  
 Insert course number and title you wish the course to transfer as.

- |  |   |
|--|---|
| <input type="checkbox"/> E.M.U. as _____ | <input type="checkbox"/> _____ as _____ |
| <input type="checkbox"/> U of M as _____ | <input type="checkbox"/> _____ as _____ |
| <input type="checkbox"/> _____ as _____  | <input type="checkbox"/> _____ as _____ |

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<p><b>Course</b> HVA 130</p>	<p><b>Course title:</b> Electrical Systems and Illumination</p>	
<p><b>Course description</b> State the purpose and content of the course. Please limit to <u>500</u> characters.</p>	<p>This Course is designed for the staff to gain the necessary knowledge to be able to safely operate and maintain a buildings electrical equipment, identify the components of electrical systems, and maintain electric motors and lighting fixtures.</p>	
<p><b>Course outcomes</b> List skills and knowledge students will have after taking the course.</p> <p><b>Assessment method</b> Indicate how student achievement in each outcome will be assessed to determine student achievement for purposes of course improvement.</p>	<p><b>Outcomes</b> (applicable in all sections)</p> <ol style="list-style-type: none"> <li>1. Apply safety rules and safe work practices while working around electricity.</li> <li>2. Identify the physical and electrical properties of AC and DC circuits.</li> <li>3. Interpret wiring diagrams for the purpose of wiring circuits, determining the normal operation of circuits, and for troubleshooting circuit faults.</li> <li>4. Identify the physical and electrical properties of lighting devices.</li> </ol>	<p><b>Assessment</b> Methods for determining course effectiveness</p> <p>A written final exam will be administered by the BOMI institute (a nationally recognized testing institution).</p>
<p><b>Course Objectives</b> Indicate the objectives that support the course outcomes given above.</p> <p><b>Course Evaluations</b> Indicate how instructors will determine the degree to which each objective is met for each student.</p>	<p><b>Objectives</b> (applicable in all sections)</p> <p><u>For outcome 1</u> Recognize the safe and effective use of an electrical meter Identify the safety precautions to follow while servicing mechanical and electrical equipment.</p> <p><u>For outcome 2</u> Demonstrate a knowledge of alternating current and direct current</p> <p><u>For outcome 3</u> Interpret building power distribution through wiring diagrams.</p> <p><u>For outcome 4</u> Identify the physical and electrical properties of light and illumination.</p>	<p><b>Evaluation</b> Methods for determining level of student performance of objectives</p> <p><u>For outcome 1</u> A written explanation on safe and effective use of a multimeter A written explanation of electrical safety.</p> <p><u>For outcome 2</u> A written explanation of the differences between AC and DC power.</p> <p><u>For outcome 3</u> A written explanation of how to read a wiring diagram.</p> <p><u>For outcome 4</u> A written explanation of the operation, and theory of lighting.</p>

List all new resources needed for course, including library materials.

**Student Materials:**

<p><b>List examples of types</b> Texts Supplemental reading Supplies Uniforms Equipment</p>	<p><b>Electrical Systems and Illumination</b></p>	<p><b>Estimated costs</b> \$ 200.00</p>
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MASTER SYLLABUS

Tools Software		
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**Equipment/Facilities:** Check all that apply. (All classrooms have overhead projectors and permanent screens.)

Check level <u>only</u> if the specified equipment is needed for <u>all</u> sections of a course. <input type="checkbox"/> Level I classroom Permanent screen & overhead projector  <input type="checkbox"/> Level II classroom Level I equipment plus TV/VCR  <input type="checkbox"/> Level III classroom Level II equipment plus data projector, computer, faculty workstation	<input checked="" type="checkbox"/> Off-Campus Sites <input type="checkbox"/> Testing Center <input type="checkbox"/> Computer workstations/lab <input type="checkbox"/> ITV <input type="checkbox"/> TV/VCR <input type="checkbox"/> Data projector/computer <input type="checkbox"/> Other _____
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**Assessment plan:**

Learning outcomes to be assessed (list from Page 3)	Assessment tool	When assessment will take place	Course section(s)/other population	Number students to be assessed
1. Apply safety rules and safe work practices while working around electricity.	BOMI analysis	Summer 2009	All sections	All students completing course
2. Identify the physical and electrical properties of AC and DC circuits.	BOMI analysis	Summer 2009	All sections	All students completing course
3. Interpret wiring diagrams for the purpose of wiring circuits, determining the normal operation of circuits, and for troubleshooting circuit faults.	BOMI analysis	Summer 2009	All sections	All students completing course
4. Identify the physical and electrical properties of lighting devices.	BOMI analysis	Summer 2009	All sections	All students completing course

**Scoring and analysis of assessment:**

1. Indicate how the above assessment(s) will be scored and evaluated (e.g. departmentally developed rubric, external evaluation, other). Attach the rubric.  
BOMI will analyze the test.
2. Indicate the standard of success to be used for this assessment.  
70% of students should pass the BOMI test.
3. Indicate who will score and analyze the data.  
The BOMI institute will score the exam; results will then be forwarded to the full time faculty of the HVAC program for assessment.
4. Explain the process for using assessment data to improve the course.  
BOMI does not release the test to WCC staff, they will forward the number of people who passed versus failed.

NOTE: BOMI institute administers the exam and they do not release it to outside parties.