



Date _____

Community Education Course Proposal and Syllabus

Course Title: _____

Instructor: _____

Address: _____

E-mail address: _____

Banner ID (NMT Employees & Students): _____

Phone: Main Phone () _____ **Alt Phone:** () _____

Semester: Fall _____ Spring _____ Summer _____

Enrollment: Minimum enrollment _____ Maximum enrollment _____

Meeting Times Available:

Days: _____ Time: _____

Days: _____ Time: _____

Note that class schedules are generally adjusted according to available space

Course Length Dates (non-credit): _____

To Be Completed by CED Staff Only

Course is for: _____ Credit or _____ Non-Credit

If course is for credit, how many hours? _____

Approvals: _____

I. Course Description

II. Prerequisites

III. Learning Objectives:

IV. Methods of Presentation

V. Methods of Evaluation - Midterm and Final Evaluation required, 70% attendance required for passing (courses are graded S/U)

VI. Certification students will earn in this course (if applicable):

VII. Texts or Supplemental Materials

Required:

Recommended:

VIII. Special Needs (Room facilities, equipment, materials, projector, etc.)

IX. Qualifications and Certificates –teaching experience required

- Attach certifications that pertain to this field.

X. Attach resume outlining relevant work experience

Syllabus

Instructor Phone:	
Instructor E-mail:	
Class meets at:	
Description:	
Goals:	
Requirements:	
Grading:	The course is graded satisfactory performance (S) or unsatisfactory performance (U). 70% attendance is the minimum required to pass course.
Evaluation:	Midterm and Final Evaluation or Project required for credit courses.

Course Schedule (for Regular Semester Courses)

Enter topic for the week, and required work in the appropriate columns below.
For non-traditional classes and workshops, attach a separate sheet.

Week	Topic	Required work
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		