

CHARTER SCHOOL COURSE PROPOSAL

“Course Proposal [**enter name of the course here**].” Complete required sections including all signatures. Email to michelle.gasser@stemk12.org and Ryan.Alsup@stemk12.org

SECTION 1: REQUIRED INFORMATION

Date:	
School Name	STEM School Highlands Ranch
Name of the building administrator assigned to support the completion of this course proposal:	Michelle Gasser
Phone number:	303-683-7836
Name of course:	CE BUS 2017 Business Communication and Report Writing
Course number if for course modification:	
If CE course amount of College Credit awarded	1.0 HS Credits- 3 college credit course
Department to which this course is assigned:	Business
Credit: <i>(check one if secondary course)</i>	<input checked="" type="checkbox"/> 0.50 (one semester) ← <input type="checkbox"/> 1.0 (year long)
Credit type students will earn for this course: <i>(Secondary only - Fine Art, Science, Practical Arts, Etc.)</i>	Elective
Grade level(s):	9-12

Course Shell Spreadsheet

State Standard Course Code Spreadsheet. This spreadsheet has course descriptions and the state course code used to identify Highly Qualified status and is used in state reporting.

DESCRIPTION:

Emphasizes effective business writing and covers letters, memoranda, reports, application letters, and resumes. Includes the fundamentals of business communication and an introduction to international communication

SECTION 2: OPTIONAL INFORMATION THAT MAY BE HELPFUL FOR GOVERNING BOARDS OR SCHOOL LEADERSHIP - NOT REQUIRED FOR SUBMISSION.

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Alignment to the 21st Century Skills: Explain the extent to which this course aligns to DCSD 21st Century Skills.

IMPLEMENTATION NEEDS:

Are there course prerequisites? If so, do descriptors for other courses need to be amended indicating prerequisite change?

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What courses follow the proposed course?

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Describe the process and timeline for development of necessary teacher resources, including instructional ideas, training, methods, materials, and technology.

SYSTEMS CHECK and NEEDS ASSESSMENT:

At the building level, content specific team members review needs for this proposed course and with the Principal's support.

- Yes
- No
- Forwards with approval
- Do not forward because:

SECTION 3: REQUIRED SIGNATURES/APPROVALS

Does the Building Administrator approve adoption of this course?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date _____		
Building Administrator Signature _____		
Building Administrator Name (please print) _____		

Does the Governing Board approve adoption of this course?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date of Governing Board Meeting _____		
Signature of Board President _____		
Board President Name (please print) _____		

Does the Director of Choice Programming approve adoption of this course?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Date _____		
Director of Choice Programming Signature _____		
Director of Choice Programming Name (please print) _____		

Does the Director of Academic Systems approve adoption of this course?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Date _____

Director of Academic Systems Signature _____

Director of Academic Systems Name (please print) _____

TO BE COMPLETED BY ACADEMIC SYSTEMS	DATE	ENTERED BY
Course entered in Infinite Campus database		
School Notified of Completion		
Course Scanned to Server		

Revised September, 2023

[Sample Course Proposal](#)