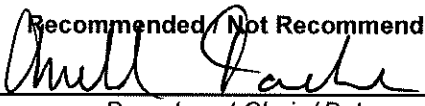
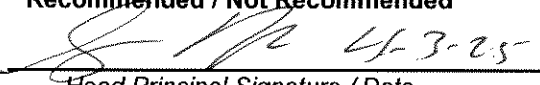
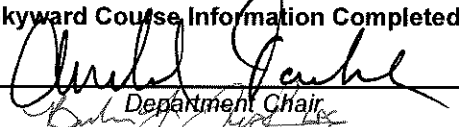


Process for Changing the Name of a Course Offering - All Schools

*This form is to be completed for a course that has been approved by Curriculum Council but needs an updated name.
Example: Physical Education I to Walking for a Lifetime*

STEP ONE: Requesting professional (teacher/counselor) completes the written request.	
STEP TWO: Requesting professional takes request to Department Chair for consideration/additional information.	Recommended / Not Recommended  Department Chair / Date
STEP THREE: Request* is sent to the Head Principal for consideration.	Recommended / Not Recommended  Head Principal Signature / Date
STEP FOUR: Counselors complete Skyward Course Information on the written request form.	Skyward Course Information Completed  Department Chair
STEP FIVE: Request is brought to the Curriculum Council for a final decision by the Department Chair and/or the requesting professional. Presence is expected at the Curriculum Council meeting to answer any questions.*	Recommended / Not Recommended** Curriculum Council Chair Signature / Date
STEP SIX: Final determination, before submission to the BOE, is determined by the Assistant/Deputy Superintendent overseeing the Office of Curriculum & Instruction.	Recommended / Not Recommended Asst./Deputy Superintendent Signature / Date
STEP SEVEN: Request is presented to BOE for approval	Approved / Not Approved
STEP EIGHT: If approved by BOE, Request is sent to technology: A Zendesk is written by Chair of the Curriculum Council & paper copies are delivered by administrative assistant.	Date Zendesk Submitted Date Forms Delivered
STEP NINE: GCHS Registrar/Counselors are notified of completed changes by Technology. Forms are returned to the Office of Curriculum & Instruction.	Date Changes Complete Forms Returned to Office of Curriculum & Instruction

****Course Not Approved (Notes from Curriculum Council):**

ALL FORMS MUST BE RETURNED TO THE OFFICE OF CURRICULUM AND INSTRUCTION.

Request for Name Change to Course Offering - All Schools

BELOW TO BE COMPLETED BY REQUESTING PROFESSIONAL/DEPARTMENT CHAIR

Professional Submitting Request: <u>Brandon L. Fisher</u> Department of Submission: <u>Counseling</u> Date Completed by Professional: <u>4/2/2025</u>	Building Submitting Request: <u>GCHS</u> Date Submitted to Department Chair: <u>4/2/2025</u>
Current Course Name: <u>Elementary Spanish II</u>	CURRENT SKYWARD INFORMATION: Short description of course (15 characters) <small>prints on transcripts</small> <u>6CCC Elem Span</u> Long description of course (30 characters) <u>6CCC Elementary Spanish</u>
New Course Name: <u>Elementary Spanish II</u>	NEW SKYWARD INFORMATION: Short description of course (15 characters) <small>prints on transcripts</small> <u>6CCC Elem Span II</u> Long description of course (30 characters) <u>6CCC Elementary Spanish II</u>
Why is this name change required? <u>6CCC offers Elementary Spanish I + Elementary Spanish II. Steward has 6CCC Elem Spanish 9641 & 6CCC Elem Span 9655</u>	
Current KCCMS Code: _____	New KCCMS Code (if applicable): <u>06102</u>
Please attach the following: <input type="checkbox"/> Standards/Course Objectives <input type="checkbox"/> Syllabus <input type="checkbox"/> Description of Course 80% of standards for the course should be addressed in order for approval. Please attach any other pertinent documents you think the Council may wish to evaluate to approve the course.	Does any additional curriculum need to be purchased for additional credit to be offered? _____ YES <u>X</u> NO If yes, please attach information regarding curriculum to be purchased that includes cost. *If approved by building principal, Council will assume that cost of new curriculum is not a concern.
List any pre-requisite courses: <u>9641- Elementary Spanish I</u>	Indicate the following: <input type="checkbox"/> Required Course <input checked="" type="checkbox"/> Elective Course <input type="checkbox"/> Either (depends on grad reqs)
BELOW TO BE COMPLETED BY COUNSELOR	
Current Skyward Course Number: <u>9655</u> Does a new Skyward Course Number need to be assigned? YES/ <u>NO</u> NOTES:	—ONLY COMPLETE THE FOLLOWING IF THEY NEED TO BE CHANGED— Course Length: <input type="checkbox"/> 1 quarter <input type="checkbox"/> 1 semester <input type="checkbox"/> 2 semesters

	<p>Credit to be Earned: <u>0.5</u></p> <p>Is this a dual credit course? <u>YES</u> / NO</p> <p>Is this a GCCC course? <u>YES</u> / NO</p> <p>Number of USD 457 Credits: <u>0.5</u> <small>(3 GCCC credit hours = 0.5 credit at USD 457)</small></p> <p>GPA Set: <input type="checkbox"/> normal <input checked="" type="checkbox"/> indexed</p> <p>Skyward Filter:</p> <p><input type="checkbox"/> LA <input type="checkbox"/> OC <input type="checkbox"/> FA <input type="checkbox"/> MA <input type="checkbox"/> SS <input type="checkbox"/> PE</p> <p><input type="checkbox"/> SCI <input type="checkbox"/> CO <input checked="" type="checkbox"/> GE <input type="checkbox"/> FL <input type="checkbox"/> STEM</p>
BELOW TO BE COMPLETED BY TECHNOLOGY	
<p><input type="checkbox"/> KCCMS Mapping Confirmed</p> <p><input type="checkbox"/> Skyward Updates including any Course Code Assigned —> _____</p> <p><input type="checkbox"/> Grad Requirements & Filtering Confirmed</p> <p><input type="checkbox"/> GCHS Registrar/Counseling Department Notified of Completion</p> <p><input type="checkbox"/> Forms Returned to Office of Curriculum & Instruction</p>	

ALL FORMS MUST BE RETURNED TO THE OFFICE OF CURRICULUM AND INSTRUCTION.