

Continuing Education Division

Donna Burns, Dean Interoffice Memorandum

	To:	Curriculum	Liaison, Instruction Office				
	From:	Donna Bur	ns				
	Date:	February 2	8, 2011				
Subject:		Course Amendment Cover Sheet					
1.	Amended Course						
	Cours	se ID	Course Title				
	VOC *Note:		In-Home Support Services may be used for multiple cours	ses leading to one cert	ificate.	-	
2.	Rationale for Course Proposal or Amendment:						
	\boxtimes M	 □ Aligns with dual-listed, credit occupational course ☑ Modification resulting from scheduled review process □ Other: 					
3.	Progra	Program Status:					
	 Yes No This course is now or will be part of a noncredit CDCP. If Yes, will the changes to the course affect how the course appears in the certificate and/or degree? ☐ Yes ☐ No If yes, a Certificate/Degree Program form must be submitted to the Curriculum Specialist. 						
4.	List the course	the names and contact information of faculty who developed or reviewed this course or group of rses:					
	Cours	e ID	Faculty Name	Discipline	Email		
	VOC	IHSS	Zorha W0lters	ABE	zwolters@mtsac.	edu	
5.	Signati	ures:					
	Made Name	lyn Arballo	Madely a arbala Signature	Director, Adult Ba	asic Education	Date	
	Donna Name	a Burns	Signature	Dean, Continuing	Ed	Date	
			3.9	1100		Date	

New Course Proposal / Course Amendment

Proposal:		Course Modifications				
Author(s):		Older Adult Program Faculty Program/Division Approval: Dean, Program Supervisor				
This	proposal	requests the MODIFICATION of the courses listed on the previous page.				
Cha	nge(s:					
	Class Sch Lecture T Lab Topic Methods Cate Cate Cate					
\boxtimes	Sample Assignments					
	Course D	escription printed in catalog 🗵 Yes 🗌 No				
	Material F	Fee State of the Control of the Cont				
		v for Title 5 (Aligns with #2 on prior page. In WebCMS, the same check box fields both				

pages).