District Concurrent Enrollment Program Proposal

The Concurrent Enrollment Program proposal must be submitted to the Concurrent Enrollment Coordinator. The Concurrent Education (CE) program proposal must include the following information:

Name of CE Program: Literature of Women - GT Literature Course

Name of Institution of Higher Education: Arapahoe Community College

I. GOALS

A. **Provide a brief overview of the Program.**
Literature of Women would be paired as the second semester selection for Intro to Literature. Both courses are provided through ACC.

B. **How does this CE Program fit into the overall educational program?**
Students would be able to take 6 credits of CE courses at the Junior level, provided they achieved the prerequisites from the PSAT.

C. **What benefits would our students receive from this program?**
Students would be able to attain 3 hours of college credit while in high school. It is also important that they read and understand women authors.

II. Concurrent Education Program Courses -

A. Provide a flow chart or table that indicates the courses students would take within the program. ** Other courses may be added or changed within the program, based upon the need of students or program modifications.

Pathway:

Semester 1
ACC-LIT 1015 Intro to Lit (69027)
Semester 2
ACC-LIT 2046- Literature of Women

B. Course Titles:
LIT 2046- Literature of Women

C. Course Descriptions:
Examines the techniques and themes in literature of various genres by and about women by considering what it means for women to be in literature, as characters and also as authors. This is a statewide Guaranteed Transfer course in the GT-AH2 category. Note: This course was previously listed as LIT 246.

D. Amount of College Credit:
3 Credit Hours

E. Prerequisite(s):
SAT/PSAT (10th grade) English 470 Less than five years old

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Does the Concurrent Enrollment Contact approve adoption of this program?
** *Your signature below indicates your approval of the program.*

Aimee Barker

Signature_____

Does the Chief Academic Officer approve adoption of this program?
** *Your signature below indicates your approval of the program.*

Erica Mason

Signature_____

Does the Chief Assessment Officer approve adoption of this program?
** *Your signature below indicates your approval of the program.*

Matt Reynolds

Signature_____

Does the Assistant Superintendent approve adoption of this program?
** *Your signature below indicates your approval of the program.*

Danny Winsor

Signature_____

Does the Board of Education approve adoption of this program?	Yes	No

Date of BOE Meeting _____

Signature_____

Office use: The following information is required to build individual courses into Infinite Campus

Credit Type: (FNA, PRA, MAT, etc)	
Department Code:	
Course Number:	
Course entered in NCAA database if applicable.	
Update Graduation Competencies course document if applicable for Math and English courses.	
VIP Code:	
CIP Code:	
Add to HEAR list, if applicable.	
Course Mapping SCED code:	
Date entered into Infinite Campus	
Credit amount:	

Document Details

Title	Literature of Women Course Proposal
File Name	ACC-LIT 2046- Literature of Women Program Proposal IGA-E-1.pdf
Document ID	7e18812eaea749feb732df25ba0639de
Fingerprint	ac792965bdae9a1706532410ba8b9735
Status	Completed

Document History

Document Created	Document Created by Tammy Melanson (tlmelanson@dcsdk12.org) Fingerprint: 4364f5e66d2ca5fdbc9a4ed882d6ee37	Nov 01 2022 11:46AM America/Denver
Document Sent	Document Sent to Aimee Barker (AJBARKER@dcsdk12.org)	Nov 01 2022 11:46AM America/Denver
Document Viewed	Document Viewed by Aimee Barker (AJBARKER@dcsdk12.org) IP: 164.47.47.3	Nov 01 2022 12:08PM America/Denver
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