

COURSE AND SYLLABUS FORM

Syllabus Cover Sheet

Course Discipline Code & No: EDU 103 Title: Special Issues in Paraprofessional Practice Effective Term Fall 2004

Division Code: MNB Department Code: BEHD Org #: _____

Don't publish: College Catalog Time Schedule Web Page

Reason for Submission. Check all that apply.

- New course approval
- Five-year syllabus review (Attach assessment results.)
- Major change
- Minor change (Corrections, editing, clarification)
- Reactivation of inactive course
- Inactivation (Submit this page only.)

Change information:

Minor changes

- Course discipline code & number (was _____) (when changing course number, select "inactivation" to discontinue the old course.)
- Course title (was _____)
- Course description
- Course objectives (minor changes)

Major changes (reviewed by Curriculum Committee.)

- Credit hours (credits were: _____)
- Total Contact Hours (total contact hours were: _____)
- Distribution of contact hours (contact hours were: lecture: _____ lab _____ clinical _____ other _____)
- Pre or co-requisites
- Distance Learning section approval
- General Education Distribution Course: Add Remove
- Honors section approval
- Change in Grading Method
- Objectives
- Other _____

For major changes, consultation with all departments affected by this course is required. Attach "course use in programs" report from Curriculum Database for Faculty.

Rationale for course or course change

1. Assessment-based:

2. Non-assessment-based: This is the last course in the Paraprofessional Portfolio Preparation certificate, and emphasizes critical areas of responsibility for paraprofessionals.

Approvals Department and divisional signatures indicate that all departments affected by the course have been consulted.

Department Review by Chairperson New resources needed All relevant departments consulted

Print: _____ Signature _____ Date: _____
Faculty/Preparer
 Print: STARBUCK Signature Star Buck Date: 4/29/04
Department Chair

Division Review by Dean Request for conditional approval
 Recommendation Yes No M. Showers 4/29/04
Dean's/Administrator's Signature Date

Curriculum Committee Review
 Recommendation _____
 Tabled Yes No _____
Curriculum Committee Chair's Signature Date

Vice President of Instruction Approval
 Approval Yes No Proger M. Palay 4/30/04
Vice President's Signature Date

Do not write in shaded area.
 ACS Code _____ Entered in: Banner 4/30 C&A Database 4/30 Log File 4/30
 Approved for General Education Area/Group _____ Syllabus Date _____ Basic skills table updated
 Contact fee

MAY 15 2004

Please return completed form to the Office of Curriculum & Articulation Services.

COURSE AND SYLLABUS FORM

Course Discipline & No.: EDU 103 Title: Special Issues in Paraprofessional Practice

Credit hours: <u>3</u> If variable credit, give range: _____ to _____ credits	Instructor contact hours per semester: Lecture: <u>45</u> Lab: _____ Clinical: _____ Practicum: _____ Other: _____ Total contact hours: <u>45</u>	Class capacity: <u>30</u> Standard capacity is 30 students unless otherwise specified in the Master Agreement.	Grading options: <input type="checkbox"/> P/NP (limited to clinical & practica) <input type="checkbox"/> S/U (for courses numbered below 100) <input checked="" type="checkbox"/> Letter grades
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Prerequisites. Select one: <input type="checkbox"/> College-level Reading & Writing <input checked="" type="checkbox"/> Reduced Reading/Writing Scores COMPASS Reading <u>=70</u> COMPASS Writing <u>=81</u> <input type="checkbox"/> No Basic Skills Prerequisite (College-level Reading and Writing is <u>not</u> required.) Corequisites (<u>must</u> be enrolled in this class also during the same semester): _____ _____	In addition to Basic Skills in Reading/Writing: Level I (enforced in Banner) <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Course/Test</th> <th style="text-align: center;">Grade/Score</th> <th style="text-align: center;">Concurrent Enrollment</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><u>EDU 100</u></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> and <input type="checkbox"/> or <u>EDU 101</u></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/> and <input type="checkbox"/> or <u>EDU 102</u></td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> and <input type="checkbox"/> or _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> Level II (enforced by instructor on first day of class) <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Course</th> <th style="text-align: center;">Grade/Score</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> and <input type="checkbox"/> or _____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> and <input type="checkbox"/> or _____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> and <input type="checkbox"/> or _____</td> <td style="text-align: center;">_____</td> </tr> </tbody> </table>	Course/Test	Grade/Score	Concurrent Enrollment	<u>EDU 100</u>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/> and <input type="checkbox"/> or <u>EDU 101</u>	_____	<input type="checkbox"/>	<input checked="" type="checkbox"/> and <input type="checkbox"/> or <u>EDU 102</u>	_____	<input type="checkbox"/>	<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	<input type="checkbox"/>	Course	Grade/Score	_____	_____	<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	<input type="checkbox"/> and <input type="checkbox"/> or _____	_____	<input type="checkbox"/> and <input type="checkbox"/> or _____	_____
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Enrollment restrictions (In addition to prerequisites, if applicable.) <input type="checkbox"/> and <input type="checkbox"/> or <input type="checkbox"/> Instructor consent required <input type="checkbox"/> and <input type="checkbox"/> or <input type="checkbox"/> Admission to program required Program _____ <input type="checkbox"/> and <input type="checkbox"/> or <input type="checkbox"/> Other (please specify): _____	Please send syllabus for transfer evaluation to: <input type="checkbox"/> EMU <input type="checkbox"/> UM <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Instructional mode <input checked="" type="checkbox"/> On campus <input type="checkbox"/> Online <input type="checkbox"/> Blended (online and on-campus combined) <input type="checkbox"/> ITV <input type="checkbox"/> Other
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Course Options General Education Group I (Select one area) <input type="checkbox"/> Writing <input type="checkbox"/> Nat. Sci. <input type="checkbox"/> Speech <input type="checkbox"/> Soc./Behav/ Sci. <input type="checkbox"/> Math <input type="checkbox"/> Arts/Hum. Courses must meet all criteria. <input type="checkbox"/> 1. Is a standard introductory course in the discipline <input type="checkbox"/> 2. Has a verified transfer acceptance <input type="checkbox"/> 3. Meets the critical thinking requirement <input type="checkbox"/> 4. Assesses academic achievement <input type="checkbox"/> 5. Covers minimum knowledge/skills	Honors section. Not all criteria are required. Check relevant items. <input type="checkbox"/> 1. Emphasis on primary source materials <input type="checkbox"/> 2. Emphasis on independent study/research <input type="checkbox"/> 3. Greater rigor of course materials <input type="checkbox"/> 4. Interdisciplinary approach <input type="checkbox"/> 5. Development of critical thinking skills <input type="checkbox"/> 6. Additional course objectives <input type="checkbox"/> 7. Additional instructional methods <input type="checkbox"/> 8. Satisfaction of the service component
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List all new resources needed for course, including library materials.

COURSE AND SYLLABUS FORM

Syllabus

Course discipline code & number EDU 103	Course title Special Issues in Paraprofessional Practice	Credit hours 3
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Course description Brief statement of the purpose and content of the course	This is the final course for the Paraprofessional Portfolio Preparation Certificate. Topics essential to the responsibilities of the paraprofessional are addressed, such as: behavior management; assistive technology; instructional support strategies; and communication skills.	
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Course outcomes List brief statements that indicate what students will know and be able to accomplish as a result of taking the course. Indicate how these outcomes will be assessed for NCA assessment of student achievement.	Outcomes <ol style="list-style-type: none"> 1. Demonstrate effective communication with supervisors, parents, peers, and students. 2. Demonstrate the correct use of instructional and assistive technological devices. 3. Apply appropriate techniques for assisting in reading, writing, and mathematics instruction, under the direction of a teacher. 4. Apply appropriate behavior management strategies to classroom situations. 	Assessment Method Evaluations by school district personnel.
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Content outline List in sequence the instructional units/modules/clusters of related topics that will be taught, and indicate the major instructional objectives for each unit. Indicate methods that will be used in each unit to evaluate student work for grading.	Unit and Unit Objectives Unit 1 Effective communication <ol style="list-style-type: none"> 1. Identify elements of effective communication. 2. Explain effective communication techniques. 3. Apply elements of effective communication appropriately. Unit 2 Instructional and Assistive Technology <ol style="list-style-type: none"> 1. Set-up selected devices. 2. Explain the use of selected devices in instruction. Unit 3 Techniques for Instructional Support <ol style="list-style-type: none"> 1. Explain the use of selected instructional support techniques. 2. Apply instructional support techniques correctly under the direction of a teacher. Unit 4 Behavior Management <ol style="list-style-type: none"> 1. Identify classroom behavior management strategies. 	Evaluation Method <p>Model effective communication in scenarios involving teacher, parent, student, and colleague roles.</p> <p>Demonstrate the use of selected devices, in the context of instructional support.</p> <p>In writing or orally: List instructional support techniques. Describe instructional support techniques. Given a classroom scenario, select appropriate instructional support techniques.</p> <p>In writing or orally:</p>
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	<p>2. Explain classroom behavior management strategies.</p> <p>3. Apply classroom behavior management strategies appropriately.</p>	<p>List behavior management strategies</p> <p>Describe behavior management strategies.</p> <p>Given a scenarios, select appropriate behavior management strategy.</p>
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COURSE AND SYLLABUS FORM

Student Materials

List examples of types		Estimated costs.
Texts Supplemental reading Supplies Uniforms Equipment Tools Software	Coursepack	\$ 10.00

Equipment/Facilities: Check all that apply. (All classrooms have overhead projectors and permanent screens.)

Check level <u>only</u> if the specified equipment is needed for <u>all</u> sections of a course. <input checked="" type="checkbox"/> Level I classroom Permanent screen & overhead projector <input type="checkbox"/> Level II classroom Level I equipment plus TV/VCR <input type="checkbox"/> Level III classroom Level II equipment plus data projector, computer, faculty workstation	<input type="checkbox"/> Off-Campus Sites <input type="checkbox"/> Testing Center <input type="checkbox"/> Computer workstations/lab <input type="checkbox"/> ITV <input type="checkbox"/> TV/VCR <input type="checkbox"/> Data projector/computer <input type="checkbox"/> Other _____
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