Press “F11” to Move to Fill-In Areas

**ILLINOIS ADMINISTRATORS’ ACADEMY**

**Course Proposal Template**

(Revised 3/28/14)

1. **Course Summary**

***A. Course Title:***

*(Note: The title should be concise and descriptive, indicating the content or topic of the course. If you cannot determine from the title what the course is about, it will not be approved. There is a limit of 100 characters and spaces.)*

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***B. Course Description:***

*(Note: The description should clearly and concisely provide information about the nature of the course and its content. The description should align with the outcomes in the course. It is not a marketing tool to entice participants, so catchy words and phrases that do not add clarity to the description should not be used.)*

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| ***C. Professional Development Time:*** |  | Hours |  | Minutes |

*(Note: A minimum of six hours of professional development time required. At least three hours must be direct contact instruction.)*

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| ***D. Online Distance Education Course:*** |  | Yes |  | No | (Refer to Online Distance Education Course Policy) |

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| ***E. Leadership Area:*** |  | Instructional Staff Development |  | Communication Skills |
| (Select Only One) |  | School Improvement |  | Public School Relations |
|  |  | School Accountability |  | Evaluation of Personnel |
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| ***F. School Leader Standard:*** |  | Facilitating a Vision of Learning |  | Management |
| (Select Only One) |  | School Culture and Instructional Program |  | Collaboration with Families and Communities |
|  |  | Acting with Integrity, Fairness, and in an Ethical Manner |
|  |  | The Political, Social, Economic, Legal and Cultural Context |
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| ***G. Target Group:*** |  | Superintendent |  | Instructional Supervisor |
| (Select Only One) |  | Principal / Assistant Principal |  | School Business Official |
|  |  | Department Chair |  | Other |
|  |  | Director of Special Education |  |  |
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1. **Participants’ Outcome(s), School leader standards, and performance/knowledge indicators**
2. Describe in detail each outcome expected as a result of this course. Course content must focus on a single set of measurable outcomes. Limit outcomes to no more than five per course. An outcome must be worded as what the participants should know or be able to do – not as actions. For example, “Participants will learn how to measure student growth” is an action showing what participants will do. However, “Participants will know how to measure student growth” is an outcome because it states what participants will know as a result of completing the course.
3. Identify at least one School Leader Standard addressed in each outcome from the list of 48. (No more than five per course.)
4. For each School Leader Standard listed, identify the Performance / Knowledge Indicators addressed.

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| **Description** | **School Leader Standard(s)** | **Performance / Knowledge Indicators** |
| 1.  |  |  |
| 2.  |  |  |
| 3.  |  |  |
| 4.  |  |  |
| 5.  |  |  |

If you need additional space, please check the box 🞏 indicating that an extra sheet is attached.

1. **Course Materials**

Provide a list of all required and/or recommended course materials. For approval, a proposal must have at least one substantive required material such as a book. Indicate if the materials listed are copyrighted. ***Important Disclaimer: The acquisition of written approval for copyrighted materials to be used by participants is the sole responsibility of the provider and/or presenter.***

**Type of Material:** ✓ Book ✓ Booklet ✓ Court Case – State/Federal ✓ Form ✓ Handout ✓ Law – State/Federal ✓ Journal

✓ Manual ✓ Magazine ✓ Newsletter ✓ Power Point Presentation ✓ Research Paper ✓ Software ✓ Video ✓ Website

**Time Period:** ✓ Unknown ✓ Annual ✓ Spring ✓ Summer ✓ Fall ✓ Winter ✓ Calendar Month (January – December)

***Please place an “X” under “Required” or “Recommended”. Select only one.***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Type of Material** | **Title** | **Author** | **Year of Publication** | **Time Period** | **Specific Page Numbers or ALL** | **Copyrighted** | **Required** | **Recommended** |
| **Yes** | **No** |  |  |
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| If additional space is needed for the course materials, please check the box 🞏 indicating that an extra sheet is attached. |

**3a. Copyrighted Materials**

Please list contact information for attaining the rights to use the materials if not readily available to purchase.

|  |  |  |
| --- | --- | --- |
| **Copyrighted Material** | **Contact Person** | **Phone Number** |
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If additional space is needed for copyrighted materials, please check the box 🞏 indicating that an extra sheet is attached.

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**3b. Research References**

Please list all research references used to create the course. *(Note: At least one research reference is “required”.)*

For each reference listed:

1. Indicate the type of material. (Book, Booklet, Court Case – State/Federal, Form, Handout, Law – State/Federal, Journal, Manual, Magazine, Newsletter, Power Point Presentation, Research Paper, Software, Video, Website.
2. List the formal title.
3. List the name of the author(s).
4. List the year of publication. (Research should be current within the past five years.)
5. If applicable, indicate the time period. (Unknown, Annual, Spring, Summer, Fall, Winter, Calendar Month)
6. If applicable, indicate the page number(s).

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| **Type of Material** | **Title** | **Author(s)** | **Year of Publication** | **Time Period** | **Page No(s)** |
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If additional space is needed for the research references, please check the box 🞏 indicating that an extra sheet is attached.

**4. Course Syllabus**

Provide the proposed course syllabus.

1. List each subtopic.
2. List the activities in the recommended order.
3. Indicate which subtopic includes the Application / Dissemination Component.
4. Indicate the duration of time.
5. Indicate whether each subtopic involves direct or indirect contact.
6. Identify the outcome addressed.

**Note: A minimum of six (6) hours of professional development time is required. At least three (3) hours must be direct contact instruction.** (Registration, breaks, lunch, and other non-instructional time should not be included.)

Please place an “X” under “Direct” or “Indirect Contact”. Select only one.

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| --- | --- | --- | --- | --- | --- | --- |
| **Subtopic**(Maximum 100 Characters) | **Recommended Activity** | **Application****Component** | **Duration Time****Hrs. Min.** | **Direct****Contact** | **Indirect****Contact** | **Outcome****(Indicate No.)** |
|  |  Large Group Discussion Small Group Discussion Lecture PowerPoint Presentation Video / Audio Individual Reading Activity Group Activity Individual Activity Demonstration Dramatization Large Group Instruction Small Group Instruction Review Website  |

|  |  |
| --- | --- |
|  | Yes |

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|  | No |

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| **Subtopic**(Maximum 100 Characters) | **Recommended Activity** | **Application****Component** | **Duration Time****Hrs. Mins.** | **Direct****Contact** | **Indirect****Contact** | **Outcome****(Indicate No.)** |
|  |  Large Group Discussion Small Group Discussion Lecture PowerPoint Presentation Video / Audio Individual Reading Activity Group Activity Individual Activity Demonstration Dramatization Large Group Instruction Small Group Instruction Review Website  |

|  |  |
| --- | --- |
|  | Yes |

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| --- | --- |
|  | No |

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|  |  Large Group Discussion Small Group Discussion Lecture PowerPoint Presentation Video / Audio Individual Reading Activity Group Activity Individual Activity Demonstration Dramatization Large Group Instruction Small Group Instruction Review Website  |

|  |  |
| --- | --- |
|  | Yes |

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| --- | --- |
|  | No |

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| --- | --- | --- | --- | --- | --- | --- |
| **Subtopic**(Maximum 100 Characters) | **Recommended Activity** | **Application****Component** | **Duration Time****Hrs. Mins.** | **Direct****Contact** | **Indirect****Contact** | **Outcome****(Indicate No.)** |
|  |  Large Group Discussion Small Group Discussion Lecture PowerPoint Presentation Video / Audio Individual Reading Activity Group Activity Individual Activity Demonstration Dramatization Large Group Instruction Small Group Instruction Review Website  |

|  |  |
| --- | --- |
|  | Yes |

|  |  |
| --- | --- |
|  | No |

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|  |  Large Group Discussion Small Group Discussion Lecture PowerPoint Presentation Video / Audio Individual Reading Activity Group Activity Individual Activity Demonstration Dramatization Large Group Instruction Small Group Instruction Review Website  |

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| --- | --- |
|  | Yes |

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|  | No |

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| **Total Direct Contact Time:** |  | **Total Indirect Contact Time:** |  | **Total Course Time:** |  |

If additional space is needed for the course syllabus, please check the box 🞏 indicating that an extra sheet is attached.

**5. Application / Dissemination Component**

1. The activity listed is determined by the subtopic marked on the Course Syllabus. The activity may only be listed as an “Individual Activity in one Subtopic area.” Any pre-discussion or follow-up to the A/D component must be listed in separate subtopics.

***(This item will be program generated in IAAMS by your selection of the Application / Dissemination Component on the Course Syllabus.)***

1. Describe the product(s) each participant must complete as the Application/Dissemination Component. The description must include specifically what the participants will do and details about the content required for the final product. It is not necessary to state that products will be collected or turned into the presenter because an official representative of the delivering organization must review the product(s) submitted by each participant.
2. **Certified or Trained Presenters**

Indicate if the course must be presented by certified / trained presenters. 🞏 Yes 🞏 No

If yes, please list a contact and their phone number, as well as the formal names of the certified/trained presenters’ information so other entities may obtain a list of the certified / trained presenters.

1. Name of the entity or Person to Contact for List of Certified / Trained Presenters:
2. Phone Number:
3. Name of all certified/trained presenters:

Indicate if you will train individuals interested in becoming certified / trained presenters for this course. 🞏 Yes 🞏 No

List the minimum requirements, if any, individuals must possess in order to qualify to be trained as a certified / trained presenter (e.g. teaching experience, holding an administrative certificate, successful adult trainer, etc.).

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| **Provider agrees to provide access, without charge, to Illinois State Board of Education staff to all workshop sessions for this Academy.** 🞏 |

**\*\* IF THIS COURSE IS AN ONLINE DISTANCE EDUCATION COURSE, PLEASE CONTINUE \*\***

1. **Online Distance Education**
2. **Advance Notice**

List the web address where advance notice information will be posted.

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1. **Required Equipment**

List all equipment that will be necessary to complete the course. (i.e., computer – minimum memory and speed)

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1. **Browser**

Check all that will work and indicate minimum version of browser.

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| --- | --- | --- |
|  | IE |  |
|  | Netscape |  |
|  | AOL |  |
|  | Other(s) |  |

1. **Software**

List all software and minimum versions necessary to complete the course. (i.e., Adobe 6.0)

|  |  |
| --- | --- |
| **No.** | **Software Required** |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |

1. **Required Technological Competence / Skills**

List all skills necessary to complete the course. (i.e., knowledge of MS Word)

|  |  |
| --- | --- |
| **No.** | **Technological Competence /Skills** |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |

1. **Instructions to Enroll and Participate in Course**

List the instructions to participate in the course in the appropriate sequence. Instructions must include the timeframe(s) the participants are required to be in the chat room (i.e., the first Monday of each month, 3 p.m. – 5 p.m.).

|  |  |
| --- | --- |
| **No.** | **Instructions** |
| **1.** |  |
| **2.** |  |
| **3.** |  |
| **4.** |  |
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| **7.** |  |
| **8.** |  |
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| **10.** |  |
| **11.** |  |
| **12.** |  |

1. **Web Addresses**

List the web addresses that will be used to complete the course.

Web address where participant will register for Academy.

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Web address where participants will login to engage in the Academy.

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Web address where chat room will be located.

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1. **Help Desk Information**

List all that will be available to participants.

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| --- | --- | --- |
|  | Web Address |  |
|  | Email Address |  |
|  | Phone Number |  |

1. **Security**

List the company that provided the server certificate and the certificate number.

|  |  |
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| Certification Authority |  |
| Certificate Number |  |

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|  | **Provider agrees to provide access, without charge, to Illinois State Board of Education staff to all web locations participants will utilize to complete the course.** |

**AA – Template for New Course Proposal Format 03-28-2014**