New Course Submission for Community Colleges <u>ONLY</u>

Non-community college providers should fill out this JotForm

Instructions: Answer all the **bold** questions. Answer the *italicized* questions only if they are applicable.

See the Provider Manual for more details.

Provider Name:			5-Digit College #:		
				e found in DAISI under tion > Program Details)	
Fixed Enrollment:	Open Enrollment:	Enrollment: Course		e Number/Code:	
Course Title/Name:					
Hours per week:	Number of Weeks:		_ Times Course Can Be Repeated:		
Units of Instruction Min: 0.5	Units of Instruction N	Max:		(must be ≤ 3)	
Job Skills Incorporated: Note: If no, skip to the next bo i		Math Only:	Bridge:	Career Pathway:	
Will any class sections of this co Note: If no, skip to the "Submit		rid or Distance Lear	ning format? Yes:	No:	
Curriculum to be used (must be	approved by ICCB):				
Percent of class ti me using curr	iculum (Hybrid only; en	ter a range if this w	ill vary from class to	class):	
How will proxy hours b	e tracked?				
Does this course meet web-acc Explain how it is ADA-c		-compliance? Yes:	No:		
Submitted By:					
Printed Name		itle		Phone	
Signature	 D	ate	E-Mail		
Attach this form to your ICCIS so objectives of the course, 3) a n competencies (if applicable).				ts: 1) a topical outline, 2) specifi alignment, and 5) EL/Civics	

Note: Your ICCIS Submission will not be processed unless this form <u>and</u> a syllabus are attached.