MVLA New Course Proposal Form

New courses may be considered by the Board of Trustees for the following school year. Please submit form to Teri Faught, teri.faught@mvla.net in Education Services.

Proposed Course Name: Specialized Academic Instruction (SAI) English 5

Department: Special Education

School Site: MVHS

- 1. What A-G and/or graduation requirements would this course satisfy? If course is eligible for A-G, has the course been approved? *No*
- 2. What is the rationale for this course? Include specific reference to CCSS, CA-NGSS, State and College Board Frameworks, and District goals as appropriate. We have students that have completed SAI English courses 1-4 in their years at MVHS and there is a need for SAI English 5.
- 3. What student population is likely to be served by this course? 12th graders in Special Education.
- 4. What value will this course add to the educational experiences of our students? It will allow students to build their skills in English but may not be prepared to be in a General Education English course.
- 5. Is this course part of a sequence? (exs. an introductory course that leads to another, or a college prep course that prepares students for AP offerings): Yes.
- 6. How was it determined that there is a demand for this course? Based on numbers and our reflections on the CoTaught classes in the English Department.
- 7. How many sections of the course are anticipated for the first year it is offered? How many in years 3-5? One section this year and it may not need to be offered every year but can be an option if needed.
- 8. What is the possible impact of this course on other courses and/or the master schedule? *It only impacts Special Education students*.
- 9. Other than section allocation, are there other budget impacts, such as for textbooks, equipment, materials, etc.? No
- 10. Is there other pertinent information not addressed in the responses above that would support the approval of this course? *No*

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Does the proposed course have the support of the department to which it is associated? _X Yes No Not applicable
Does the site Leadership Team or Coordinator Group support adopting the proposed course? _X Yes No Not applicable
As the site leader, do you support presenting this proposed course to the Board for consideration? _X Yes No Not applicable
Principal's signature: <u>Michael Jimenez</u> Date: <u>5/17/2022</u>
District Office Use Only:
Associate Superintendent Signature/Date
School Board Approval Date:

Site recommendation and signature, to be completed by the Principal: