Request for Curriculum Review Form

For Advanced Standing Courses

Date of Request:____________________

High School:

Instructor Name:

Instructor Email: ____________________________________________________________________________

Phone Number: ____________________________________________________________________________

Discipline:

High School Course Title: ______________________________________________________________________

MSTC Course Title: ____________________________________________________________________________

Course Length: ☐ Semester ☐ Year

Grade Level: ☐ Junior ☐ Senior

Please include the following and check those items attached:

☐ Textbook title/edition/publication date/author

☐ Specific competencies and general objectives taught

☐ Method(s) of evaluation or how mastery is determined

☐ Grading formula (i.e. tests = _____%; assignments = _____%)

☐ Course outline and syllabus

This form must be submitted by March 31st for consideration for the following school year.

Submit form to:

Xiong Vang, High School Career Coach
Mid-State Technical College
500 32nd Street North
Wisconsin Rapids, WI 54494

Or: xiong.vang@mstc.edu