

Instructor/Course Approval

Directions: This form is to be completed for each new instructor as well as for a current instructor who is proposing a new course as part of a tech-prep dual-credit course between UAS and a Tech Prep Education Partner.

Instructions/Checklist

- 1. Complete this cover sheet.
- 2. Attach your current resume.
- 3. Attach copies of your transcripts. (Please note: Only copies of your transcripts are needed at this time.)
- 4. Attach your proposed syllabus.
- 5. Email this cover sheet and all required attachments to the UAS Tech Prep Coordinator (kszczatko@uas.alaska.edu).

Instructor Name:	Affiliated School District:	
District Mailing Address:		
Business Phone:	Professional Email:	
Personal Mailing Address:		
Personal Phone Number:	Personal Email:	
Social Security Number:	UA ID #: Date of Birth:	
PROPOSED COURSE		
UAS: Subject Course #	Title	
Proposed Start Date: Semester	_ Year Course Offered: OFall Spring C	<u>)</u> Both
District Course Title:		
UAS APPROVAL SIGNATURES		
Approved Rejected	Approved Rejected	
UAS Program Head Signature & Date	UAS Academic Dean or Designee Signa	ature & Date
If rejected, please briefly explain why so teacher & district can address deficiencies:		