

Appendix B

Request Form: Approval of State Aid for a Non-Credit Remedial Course

Campus	1. Name: <i>(If course is to be offered at a branch campus, please specify.)</i>		
Program Contact	2. Name:	3. Email:	4. Phone:
	5. Name:	6. Email:	
Chief Academic Officer	7. Signature:		8. Date
	<i>Note: Signature of the Chief Academic Officer assures that the proposed course or program is consistent with SUNY policy and affirms full academic oversight by the campus. Signature also verifies that quality controls, including assessment and reporting requirements are in place and satisfy §602.5 and MSCHE accreditation standards. The signature also affirms that the proposal has met all applicable campus administrative and shared governance procedures for consultation.</i>		
About the Course	9. Designation & no. (eg. CTE 151):	10. Course title:	
	11. Course Description:		
	12. <u>Please separately attach to this form a course syllabus.</u> Documentation must include: <ul style="list-style-type: none"> • Course goals, objectives and expectations for student learning. Please specify all, i.e., by the end of the course, what will students be able to do? • Attendance Policy. Note that State aid may be claimed only for students who have attended the class at least through the census date, which shall be established as consistent with credit-bearing classes, and which should take place no earlier than when 20% of the scheduled classes have been completed. • Course repetition and attendance policies must be included and their consistency with equivalent policies for credit-bearing courses must be demonstrated. 		
<i>Alignment with Credit-Bearing</i>	13. Identify the credit-bearing course and/or program for which the proposed non-remedial course or program is designed to prepare students.		

<i>Coursework</i>	a. Designation & no. (eg. CTE 151):		b. Course title:	
	14. Is this course equivalent to any financial aid-eligible course offered on a semester basis— for imputed credit or equivalent credit? If so, identify course designation, number and title in the boxes below			
	a. Designation & no. (eg. CTE 151):		b. Course title:	
<i>Alignment with Guidelines/ Campus/SUNY Priorities</i>	15. Describe how the course or program is consistent with the <i>Non-credit Remedial Course Aid: Program Guidelines</i> as well as with campus and SUNY mission/priorities:			
<i>Faculty</i>	16. Describe requirements for faculty credentials and experience.			
<i>Course Schedule</i>	17. No. of meetings per week:		18. How many hours:	19. How many weeks:
	20. On campus, community site, extension center, online etc.?			
<i>Course Location</i>	20. On campus, community site, extension center, online etc.?			
Enrollment/Fees	21. Confirm that course is open admission (y/n):	22. Estimated semester / annual enrollment (headcount):	23. Estimated annual avg. course FTE:	24. Course tuition per student:
	25. Course fees per student:	26. Co-sponsor, if any:	27. Funding sources other than non-credit remedial State aid if applicable:	
Assessment	28. <u>Please separately attach to this form an Assessment Plan.</u> <ul style="list-style-type: none"> Describe the assessment plan for the course/program, including methodology, frequency, and how results will be used to improve student success (Note:, Regular assessments must be conducted for each State-aidable non-credit remedial course to gauge its effectiveness in preparing students for credit-bearing academic study). 			

Please submit form and required attachments via e-mail to: noncredit@sysadm.suny.edu.