

Course Proposal Form for Student-Facilitated Courses Directed Group Study (98 and 198)

Read the instructions on the third page before completing and submitting this form. All fields are required. NOV - 8 2019

Date submitted		
Term to be offered	Spring 2020	
Campus department	ESPM	
Course title	Every Kid In a Park at Rosie the Riveter National Park	
Course number (check only one)	<input checked="" type="checkbox"/> 98 (LOWER DIVISION) OR <input type="checkbox"/> 198 (UPPER DIVISION)	
Number of units	1	ATTACH a COMPLETED UNIT VALUE WORKSHEET (REQUIRED)
Student facilitator name(s) (List all student facilitators, attach an additional sheet if necessary)	Vanessa Garcia	
	<input checked="" type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate	
Student facilitator email address(es)	vangarc@berkeley.edu	
Instructor of record name	Steve Beissinger	
Instructor of record email address	beis@berkeley.edu	

Answer the first four questions either on a separate sheet or indicate the page number where the answers can be found in your syllabus, and mark your answers to questions five through seven:	Check if on a separate sheet	or indicate syllabus page number
1. What is the nature of the subject matter or content of the course? (Include a weekly schedule that shows topics, readings, and assignments for each week.)	<input type="checkbox"/>	1,4-5
2. What are the key learning outcomes? (What will students be expected to know or be able to do as a result of this course?)	<input type="checkbox"/>	1,2
3. What are the methods of instruction (e.g., lecture, discussion, collaborative learning, etc.)?	<input type="checkbox"/>	3
4. How will student performance be evaluated? (What will students be required to do to pass the class, and how much weight will each requirement have toward the final grade?)	<input type="checkbox"/>	2
5. Is the faculty sponsor's letter of support attached? (Required) <input checked="" type="checkbox"/> Yes		
6. Which UCFTR* training has the student facilitator(s) attended? (All first time student facilitators must undergo training.) <input type="checkbox"/> Facilitation & Collaborative Learning Strategies Workshop. List date (mm/dd/yy) attended: <u>Nov 12, 2019</u> or <input type="checkbox"/> Or other UCFTR organized training (List name and date) _____		
7. Who is the department staff person that the student facilitator(s) has consulted with to verify any required department procedures? Staff name: <u>Temple Byars</u>		

*Undergraduate Course Facilitator Training and Resources

Signatures: My signature below acknowledges my responsibility for and approval of this proposal.	
Student course facilitator(s) Vanessa Garcia <i>Vanessa Garcia</i>	Date 1 November 2019
Instructor of record Steven Beissinger <i>Steven R. Beissinger</i>	Date 1 November 2019
Department chair <i>[Signature]</i>	Date 11/5/19

NOTE: The sponsoring department is responsible for the academic quality and administration of the course.

See third page for submission instructions.