

***CURRICULUM PROCEDURES REFERENCE MANUAL***

Section 4

**Curriculum Program Application for**

**Existing Program Titles**

**to be Offered to Captive or Co-opted Groups**

**(Procedures and Accountability Report)**

**(Associate in Applied Science, Diploma, and Certificate Curriculum Programs)**

***Implementation October 1, 2013***

*Revised by the State Board of Community Colleges on 09/19/2008; 08/16/13.*

**North Carolina Community College System**

##### Curriculum Program Application Procedures and Accountability Report for

##### Existing Program Titles to be Offered to Captive or Co-opted Groups

*This application should be used for parent and/or concentration programs to be offered to a captive or co-opted group.*

The State Board of Community Colleges has established rules to guide the approval of certificate, diploma and associate in applied science programs as listed in 1D SBCCC 400.6 (a)(1)

 “Captive or co-opted groups” are defined in 1D SBCCC 700.98 (a) of State Board of Community Colleges Code “as inmates in a correctional facility; clients of sheltered workshops, domiciliary care facilities, nursing facilities, mental retardation centers; substance abuse rehabilitation centers; and in-patients of psychiatric hospitals.”

The following General Statutes (G.S.) and State Board of Community Colleges Code (SBCCC) apply when offering curriculum programming to these groups (note that some are specific to inmates only):

**G.S. 115-D (c):** No course of instruction shall be offered by any community college at State expense or partial State expense to any captive or co‑opted group of students, as defined by the State Board of Community Colleges, without prior approval of the State Board of Community Colleges.

All course offerings approved for State prison inmates must be tied to clearly identified job skills, transition needs, or both. Approval by the State Board of Community Colleges shall be presumed to constitute approval of both the course and the group served by that institution. The State Board of Community Colleges may delegate to the President the power to make an initial approval, with final approval to be made by the State Board of Community Colleges.

A course taught without such approval will not yield any full‑time equivalent students, as defined by the State Board of Community Colleges.

**G.S. 115-D (c1):** Community colleges shall report full‑time equivalent (FTE) student hours for correction education programs on the basis of contact hours rather than student membership hours.

No community college shall operate a multi‑entry/multi‑exit class or program in a prison facility, except for a literacy class or program.

The State Board shall work with the Division of Adult Correction of the Department of Public Safety on offering classes and programs that match the average length of stay of an inmate in a prison facility.

**1D SBCCC 700.98 (a):** A college shall obtain State Board approval prior to providing instruction to students who are classified captive or co-opted. Captive or co-opted groups of students are defined as inmates in a correctional facility; clients of sheltered workshops, domiciliary care facilities, nursing facilities, mental retardation centers; substance abuse rehabilitation centers; and in-patients of psychiatric hospitals. Approval by the State Board of Community Colleges shall constitute approval of the curriculum program or occupational extension course(s) and the group to be served by the college.

**1D SBCCC 700.98 (b):** Instruction to captive or co-opted groups may be approved when the State Board determines that the proposed instruction for the group is not a function of the requesting agency, and the instruction is within the purpose of the community college.

**1D SBCCC 700.98 (c):** Instruction to captive or co-opted groups may be approved in the form of curriculum programs or courses and occupational extension courses. State Board of Community Colleges (SBCC) approved curricula for Captive or co-opted groups shall include changes in programs of study and SBCC approved occupational extension course modifications.

Physical education or work experience may not be a part of a curriculum program in a correctional setting.

**1D SBCCC 700.98 (d):** Policies governing student enrollment in curriculum programs or courses and occupational extension courses shall be consistent with general college policies.

In addition, the State Board has adopted the attached Curriculum Program Application Procedures to guide community colleges in preparing and submitting applications for curriculum program approval for programs to be offered to captive or co-opted groups.

**Submission of Program Application:**

Colleges seeking captive/co-opted curriculum program approval should submit an application using the attached procedures. All items must be completed and documented as indicated before the program can be considered for approval by the State Board.

Colleges are encouraged to contact the appropriate program coordinator at the System Office for assistance in the completion of this application as it relates to program content. (See Section 7 of the *Curriculum Procedures Reference Manual* for a list of Program Coordinators).

If this is an application for programming for a state prison facility, the college should also contact the System Office Director of Public Safety Training Programs as soon as planning discussions begin to ensure appropriate coordination with the Educational Services office at the Division of Adult Correction.

**Two (2) copies of the application with original signatures** should be submitted to:

captive@nccomminitycolleges.edu

Senior Vice President/Chief Academic Officer

Academic and Student Services

North Carolina Community College System

**Deadlines:**

Program applications may be submitted at any time. Completed applications received by the first working day of the month will be processed within 90 days. The approval process for applications which are received after the first working day of the month, are incomplete, or require further analysis may exceed this 90-day schedule.

Applications for programs for state prison facilities will be routed by the System Office to the Division of Adult Correction for approval prior to submission to the State Board for action.

Applications that are complete, require no further analysis or documentation, and (*if applicable*) are supported by the Division of Adult Correction will be presented to the State Board for Action. Since the State Board normally does not meet in June or December, application processing schedules which include these months may also exceed 90 days.

The *Three Year Accountability Report* must be submitted three years after program implementation.

**CURRICULUM PROGRAM APPLICATION PROCEDURES**

**Instructions for Completing Attached Application:**

*All items must be completed and documented as indicated before the program can be considered for approval by the State Board.*

1. **Program Planning**

Items A and B should be presented in narrative format and include appropriate documentation to support the case for the proposed program. This narrative will serve as the primary resource for the State Board’s consideration. The narrative is restricted to three to five pages.

1. **Purpose:**

Discuss the purpose of the proposed program and demonstrate how the proposed program directly relates to the mission of the college and the college’s Institutional Effectiveness Plan.

1. **Rationale:**

Build a narrative case for starting the new program, including employment opportunities, method of delivery, and additional information to substantiate the college’s rationale and justification for starting the new program. If the proposed program is to be offered for a state prison operated by the Division of Adult Correction, include an analysis of statewide employment opportunities; program admissions requirements; length of time required to complete credential levels as offered at the specific facility; method of delivery; documentation that the prison facility can provide adequate students, classroom space, and other support for program sustainability; and itemization of funding sources and responsibilities.

1. **Local Certification:**

Complete the institutional certification.

A copy of the minutes from the Board of Trustees meeting(s) at which the proposed program was discussed and approved must be attached to the application.

**II. Implementation of Instructional Service Agreements**

**Level III Instructional Service Agreements**: If the applying college intends to collaborate with one or more colleges to offer the proposed program, a Level III Instructional Agreement (ISA) should be included with the program application. Please utilize Section 6 of the *Curriculum Procedures Reference Manual* to obtain the guidelines and suggested format for Level III ISAs.

**Level I Instructional Service Agreements**: If a captive or co-opted facility intends to transport students to an off-facility classroom that is in another college’s service area, a Level I ISA should be on file in the college’s records.

**III. Proposed Program of Study**

The proposed program of study should be designed to be in compliance with the curriculum standard approved by the State Board of Community Colleges. The State Board approved curriculum standard for each program is located at: <http://www.nccommunitycolleges.edu/Programs/curriculum_standards.html>.

The proposed program of study should also be designed using the appropriate courses listed in the *Combined Course Library* which is located at: <http://www.nccommunitycolleges.edu/ccl.html>.

**IV. Three Year Accountability Report**

A *Three Year Accountability Report* must be submitted three years after program implementation. The report must include information on enrollment, completers, employment, licensure/accreditation and other pertinent information.

The *Three Year Accountability Report required by the State Board* should be submitted to:

accountability@nnccommunitycolleges.edu

Senior Vice President/Chief Academic Officer

Academic and Student Services

North Carolina Community College System

Note: If this program is offered in a state prison, similar information may be requested annually as part of the NCCCS and Division of Adult Correction joint planning process.



**CURRICULUM PROGRAM APPLICATION**

**for Existing Program Titles**

**to be Offered to Captive or Co-opted Groups**

**College** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Captive/Co-opted Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If State Prison Site: Prison Code \_\_\_\_\_\_\_\_\_\_\_\_ Matrix Category: \_\_\_\_\_\_\_\_\_\_\_\_**

**Program Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Concentration Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(If applicable)*

**Program Code** \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

**Credential (*Indicate the highest credential to be awarded*)**

 AAS Diploma Certificate

**Proposed Semester and Year of Implementation**

 \_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_Fall 20\_\_ \_\_

**College Contact Person (Name/Title): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Extension \_\_\_\_\_\_\_\_** **E-mail**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does this application include the use of a Level III Instructional Service Agreement (ISA)?**

 Yes No *(If yes, please be sure to include the ISA with your application.)*

**Will any students from the captive or co-opted facility be transported to classrooms outside the college’s service area for this program?**

 Yes No *(If yes, complete a Level I ISA with the associated college to keep on file)*

**I. Program Planning**

*Items A and B should be completed in a narrative format.* ***This narrative is limited to three to five pages.***

**A. Purpose:** Provide a narrative which outlines the purpose of the proposed program and demonstrate how the proposed program directly relates to the mission of the college and the college’s Institutional Effectiveness Plan. *(Attach additional completed pages.)*

**B. Rationale:** Build a narrative case for starting the new program. (See instructions provided on page 4.) *(Attach additional completed pages.)*

**If the proposed program is to be offered for a state prison operated by the Division of Adult Correction, the following tables must be completed as part of the application.**

**Table 1**: Estimate the institutional costs associated with the proposed program and indicate the totals of both start-up and ongoing costs for equipment, maintenance, and instructional costs. This should include the costs for the instructor(s).

|  |
| --- |
| **Table 1: Estimated Costs** |
| **Start-up*****(include instructor costs)*** | **$** |
| **Ongoing*****(projected yearly costs)*** | **$** |

**Table 2**: Given the estimated start-up costs and projected ongoing costs, describe the applying college's plan for obtaining the necessary funds to initiate and maintain a viable program over a three-year period. Indicate sources of revenue (State, Federal, special grant) equivalent to the summary of costs which will be used to support the proposed program.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Table 2** | State Funds(Community College) | State Funds(Adult Correction\*) | FederalFunds | Special Grant/Other (please specify) |
| Personnel |  |  |  |  |
| Fringes |  |  |  |  |
| Computers/Equipment/Other Resources |  |  |  |  |
| Supplies |  |  |  |  |
| Textbooks |  |  |  |  |
| Furniture |  |  |  |  |
| Renovation Costs |  |  |  |  |
| Other (please specify) |  |  |  |  |

\***Document that the Director of Educational Services, Division of Adult Correction, has been notified of these budgetary needs.** Prior notification of the Director of Educational Services is for planning purposes only; it does not imply program approval. Once received by the System Office, the entire captive program application packet will be routed to the Division of Adult Correction for approval prior to taking it to the State Board for action.

**C. Institutional Certification:** *Complete the following form and obtain required signatures. Form with original signatures should be included in the application.*

**Institutional Certification – Program for Captive and Co-opted Group**

*This curriculum program*

 *(Program Title) (Program Code)*

*To be offered for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

 *(Captive or Co-opted Facility)*

*will enhance the workforce of North Carolina, will provide educational and training opportunities consistent with the mission of the college, and will not duplicate the opportunities currently offered.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Community College Name)*

*has assessed the need for this program and the resources required to maintain a viable program and certifies that the college can operate this program efficiently and effectively within the resources available to the college.*

*The college understands that this proposed program will require a program accountability report that will include items such as student success measures, enrollment trends, completion rates, and employment data three years after implementation if the program is approved by the State Board.*

***(A copy of the minutes from the Board of Trustees meeting(s) where the proposed program was discussed and approved must be attached to the application.)***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature, President of College Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature, Board of Trustees Chair Date*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature, Captive/Co-opted Site Manager/Superintendent Date*

**II. Instructional Service Agreements (ISA):**

*Include a* ***Level III*** *Instructional Service Agreement with the application if the applying college intends to collaborate with one or more colleges to offer the proposed program. (See Section 6 of the Curriculum Procedures Reference Manual for guidelines.) Ensure that a* ***Level I*** *Instructional Service Agreement is on file at the college if students from the proposed program will be transported to classroom sites outside the college’s service area.*

**III. Proposed Program of Study:** *Complete the following to indicate the proposed program of study.*

**Notes:** Per 1D SBCCC 700.98(c), physical education or work experience may not be part of a curriculum program in a correctional setting. Course substitutions are not applicable.

1. **GENERAL EDUCATION:** *Degree programs must contain a minimum of 15 semester hours including at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural sciences/mathematics. Degree programs must contain a minimum of 6 semester hours of communications. Diploma programs must contain a minimum of 6 semester hours of general education; 3 semester hours must be in communications. General education is optional in certificate programs.*

**1. Communication:**

The following course(s) are required:

 **Course Number Course Title (Credit)**

ENG 111 Expository Writing (3) (Example format)

 **Communication Pick List if applicable:**

 Select a course(s) from the following:

**2.Humanities/Fine Arts:**

The following course(s) are required:

 **Course Number Course Title (Credit)**

 **Humanities/Fine Arts Pick List if applicable:**

 Select a course(s) from the following:

**3.Social/Behavioral Sciences:**

 The following course(s) are required:

 **Course Number Course Title (Credit)**

 **Social/Behavioral Pick List if applicable:**

 Select a course(s) from the following:

**4.Natural Sciences/Mathematics:**

 The following course(s) are required:

 **Course Number Course Title (Credit)**

 **Natural Sciences/Mathematics Pick List if applicable:**

 Select a course(s) from the following:

 **Total General Education Semester Hour Credits Required \_\_\_\_\_\_\_\_**

***Program of Study (Continued)***

**B. MAJOR HOURS**

**1. Core**

 The core is comprised of specific courses and/or subject areas which are required for each curriculum program. These are identified on the curriculum standard for each program.

The following course(s) are required:

 **Course Number Course Title (Credit)**

**Required Subject Area(s) if applicable:**

 ***Total Core Semester Hour Credits\_\_\_\_***

**2. Concentration (if applicable)**

 If the proposed program is a concentration, please list the required courses and/or subject areas. Only utilize the courses and/or subject areas identified on the curriculum standard.

The following course(s) are required:

 **Course Number Course Title (Credit)**

**Required Subject Area(s) if applicable:**

 ***Total Concentration Semester Hour Credits\_\_\_\_\_***

**3. Other Major Hours**

*Other major hours must be selected from prefixes listed on the curriculum standard. A maximum of 9 semester hours of credit may be selected from any prefix listed, with the exception of prefixes listed in the core or unique prefixes as noted on the standard.*

The following course(s) are required:

 **Course Number Course Title (Credit)**

**Required Subject Area(s) if applicable:**

 ***Total Other Major Semester Hour Credits \_\_\_\_***

 ***Total Major Semester Hour Credits\_\_\_\_\_***

**C. OTHER REQUIRED COURSES** *(If applicable)*

 *A college may require other courses in order to meet graduation or local employer requirements. These requirements may be met through a maximum of 7 semester hours of credit in a degree program; 4 semester hours of credit in a diploma program, and 1 semester hour of credit in a certificate program. Restricted, unique or free elective courses may not be included as other required courses.*

The following course(s) are required:

 **Course Number Course Title (Credit)**

 ***Total Other Required Semester Hour Credits\_\_\_\_\_***

 ***Total Semester Hours Credit in Program\_\_\_\_\_***

**IV. Three Year Accountability Report:** *The Three Year Accountability Report must be submitted three years after program implementation. Use the following template for the report.*

**NCCCS New Curriculum Program Application Procedures**

**Template for**

**Three Year Accountability Report for Existing Program Titles**

**to be Offered to Captive or Co-opted Groups**

*If this program is offered in a state prison, similar information may be requested annually as part of the NCCCS and Division of Adult Correction joint planning process.*

**Name of College:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Captive/Co-opted Site: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**If State Prison Site: Prison Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Matrix Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title of Curriculum Program**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of State Board Approval**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Semester Program Started at College**: Fall ⁪ Spring ⁪ Summer ⁪ 20\_ \_

**Number of Students Enrolled in Program Annually Since Implementation:**

*(Please break down by certificate/diploma/AAS level if applicable.)*

 First Year \_\_\_\_\_

 Second Year \_\_\_\_\_

 Third Year \_\_\_\_\_

**Number of Program Completers by Year:** *(Include additional years if applicable.)*

 First Year \_\_\_\_\_ Certificate\_\_\_\_\_ Diploma\_\_\_\_\_ AAS\_\_\_\_\_

 Second Year \_\_\_\_\_ Certificate\_\_\_\_\_ Diploma\_\_\_\_\_ AAS\_\_\_\_\_

 Third Year \_\_\_\_\_ Certificate\_\_\_\_\_ Diploma\_\_\_\_\_ AAS\_\_\_\_\_

**Program Outlook for Next Five Years (Brief Narrative)**

**Are there external accrediting or licensing requirements for this program?**

Yes ⁪ No ⁪

**If so, please provide date of accreditation/approval:** \_\_\_\_\_\_\_\_\_ 20 \_ \_

**or projected date of accreditation/approval:** \_\_\_\_\_\_\_\_\_ 20 \_ \_

***Attach any other information pertaining to the program.***

Please submit the *Three Year Accountability Report* to*:*

accountability@nnccommunitycolleges.edu

Senior Vice President/Chief Academic Officer

Academic and Student Services

North Carolina Community College System