



**NEW COURSE CODE REQUEST APPLICATION**  
 NORTH DAKOTA DEPARTMENT OF PUBLIC INSTRUCTION  
 SCHOOL APPROVAL & OPPORTUNITY  
 SFN 60065 (1/2019)

RETURN TO:  
 Department of Public Instruction  
 School Approval & Opportunity  
 600 East Boulevard Ave., Dept. 201  
 Bismarck, ND 58505-0440  
 Fax: (701) 328-0201

*Note: Complete a separate application for each new course area being requested.*

*Due date: For adequate planning, course code applications must be received by February 1 of the year prior to the start of the first semester of the school year, July 1 of the year prior to the start of the second semester of the school year, and November 15 of the year prior to the start of the second semester of the school year. Applications received by February 1 will be finalized by May, applications received by July 1 will be finalized by October 1, and applications received by November 15 will be finalized by January 15.*

**Section A. Provide the following school information.**

School Name		LEA Name		
Mailing Address		City	State	ZIP Code
Principal Name	E-Mail Address		Telephone Number	
Name of Person Submitting Request	E-Mail Address		Telephone Number	Date

**Section B. Provide the information below for the new or updated course code request.**

1. Does the proposed course expand on an existing state course code identified in the PK-12 Course Code Directory ( <a href="https://www.nd.gov/dpi/districtschools/course-codes">https://www.nd.gov/dpi/districtschools/course-codes</a> )?  <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:	
2. What is the <u>title</u> of the proposed course?	
3. What is the target grade level(s) for this course?	
4. Please identify the primary content area of the proposed course (example: social studies, science, physical education, fine arts, etc.).	
5. Indicate how long this course would be taught. <input type="checkbox"/> Nine Weeks <input type="checkbox"/> Semester <input type="checkbox"/> Full Year	6. Do you recommend a maximum unit(s) for this course? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:
7. Will this course be considered for credit? <input type="checkbox"/> Core <input type="checkbox"/> Elective <input type="checkbox"/> No	
8. Describe the content of the proposed course. (Please do not include curriculum, rather broad content information.)	
9. Include documentation evidencing how the proposed course aligns with the North Dakota State Content Standards.	
10. Do you recommend any course prerequisites for this course? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:	

**For Department Use Only**

Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	School Year Course is Effective
Signature and Title of Department Official	Date
State Course Code	National Course Code