MASTER SYLLABUS

Course Discipline Code & No: APP 113		ipe Trades	Effective Term 200605
Division Code: VCT	Department Code:	OH	Org #: <u>18200</u>
Don't publish: College Catalog	Time Schedule	☐Web Page	
Reason for Submission. Check all that apply New course approval Three-year syllabus review/Assessment of Course change		Reactivation of inactive Inactivation (Submit thi	
Change information: Note all changes the	at are being made. Fo	orm applies only to chang	ges noted.
Consultation with all departments affector required. Course discipline code & number (was*Must submit inactivation form for preventive (was*Math & Science: PlumCourse descriptionCourse objectives (minor changes)Credit hours (credits were:)	vious course.	Distribution of contact l lecture: lab	
	tach course assessmen	nt report for existing cour	rses that are being changed.
Rationale for course or course change. Att	men course assessmen	B B	and the series commended.
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WASHTENAW COMMUNITY COLLEGE COURSE-SYLLABUS APPROVAL FORM (CSAF)

For help screens, select a field and press F1

ECTION I. SUBMISSION INFORMATION	
. Course: (Enter proposed discipline, number & title here.) Discipline/No: APP 113 Title: Math and Science	Start Term W03
Banner allows only 29 characters and spaces, for the title. L Division Code: HAT Department Code: CIND	Org #: 14725 Don't publish: \(\int\) in College Catalog \(\int\) in Time Schedule \(\int\) on Web
both new courses and changes) Full Approval	ission: This Course is being submitted for: (check all that appropriate provided (Skip 4 and go directly to 5.) bus Review No changes to course (Submit complete syllables) (Submit complete syllables) s)* (For fully approved courses, submit revised sections only.) Inactive Course ubmit this page only.) a course that has conditional approval, please submit a complete syllables.
Minor Changes Course Discipline/Number (was) Course Description Class Capacity (was:) Pre or Co-requisites Course Objectives (minor changes) Distribution of Contact Hours (contact hours were: lect: lab clin other) Other	Major Changes (will be reviewed by Curriculum Committee.) ☐ Credit hours (credits were: 04_)
Align credit hours with local 190 third party billing ECTION II. SIGNATURES 1. Department Review (To be completed by department chair Will any new resources be required? No, none anticipated of You must consult all departments that may be affected by the documents.	
Print: Scott Klapper Signature Signature	yes no (if no, initial and return to preparer with ra Scatt Rhyper Date: 10-15 Scatt Khyper Date: 10-15
2. Division Review (To be completed by division dean; if reconstruction Is this a curricular priority for your division? yes What is the estimated enrollment?	[25]
Recommendation Yes No Dean's Signature	Date Date
Recommendation Yes No Puty A. dies	ents if necessary and forward to Executive Vice President.) fully tee Chair's Signature 3.20.03 Date
Approval Yes No Hxecutive Vice Pres	Proval (Attach) additional comments if necessary.)
	Entered in Access 13/27 Log File 3/27
pproved for General Education Area/Group	Syllabus Date 20030/

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APP 113

SECTION III. COURSE SYLLABUS

A. COURSE DETAILS (Start with #1.)

For help screens press F1.

Discipline & No.: AP Course and title will auton 1. Description: (Pleas The basic knowledge of	natically appear se be brief. Ex of math and se	plain acronyi	ing or previewing ns if used.)				
2. Credit Hours: If Variable credit, of to credit to cr	edits edit, how	Lecture: Lab: Clinical: Other:	Hours per Semester: 30 30 30 utact Hours: 60	4. Class Ca (If nonstand Class Capac Exception f	dard, attach city form.)	(Atta	Options: nce learning ch DL Form) ors (Attach ors Addendum.) Crading
	Grade		Test Name th this course. ced by instructor on 1st d	Min. Score	**Level ")" I II		equisites equired isites: (limit of 2)
8. Course Purpose: Program Requirer General Education Program Support Basic Skills/Deve Transfer Industry/Profession Enrichment	ment n elopmental	If a progra	m requirement, specify	Please send	l syllabus for valuation to:	(attach d	d for transfer: locumentation)
9. Terms Course will Terms Fall Winter		gth (e.g. 15 w	eeks, 1st 7½ weeks, etc.)		Eve onl	n years ly	Odd years only

B. MAJOR INSTRUCTIONAL UNITS A major instructional unit is a grouping of topics that naturally relate to one another. Add additional numbers as needed. (This section is unprotected so that you can cut and paste from other documents.

1. Math and Science

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C. INSTRUCTIONAL OBJECTIVES

DIRECTIONS: Use student outcomes-based language. (Example: Upon visiting a gravel pit students will observe, analyze and describe in one page the weathering processes.) Units should match those listed in Section B.

(This section is unprotected. You may cut and paste from other documents as needed.)

Unit #1 Math and Science

The student will:

- 1. Demonstrate the basic math formulas for performing work in the industry
- 2. Describe basic math knowledge
- 3. List facts, ideas, and skills in science
- 4. Perform basic computation dealing with numbers and measurements
- Describe Pipe Measurements I
- 6. Describe the properties of water, hydraulics and pneumatics
- 7. Differentiate among mechanics, metals, alloys, synthetics, and corrosion
- Demonstrate Basic Drawing and Blueprint Reading

D. INSTRUCTIONAL METHODS, EVALUATION CRITERIA, AND ASSESSMENT

∐Lecture/Discussion	Performances
Clinical Instruction	
Internet Assignments	
Computer Simulations	
On-Site Work Experience	물로 하나요 그는 그리고 하는 사람이 바로 다른 바로 가는 사람들이 되는 것이 되는 것이 되었다. 그런 그리고 하는 사람들이 되었다면 하는 것이 없는 것이 없는 것이 없는 것이 없는 것이다. 그리고 하는 사람들이 없는 것이다.
Team Assignments	### #################################
Demonstrations	
2. Evaluation Criteria:	
⊠Attendance	Quizzes_
Class Discussion	☐ ☐ Tests
⊠Papers	
Portfolios	
Projects_	
Reports	그 나는 이 그 그 그 그 그 그 그 그 그 그 그 그 그 그는 그는 그는 그는 그
Clinical Assignments	
⊠Home Work	
3. Assessment of Student Achieveme	nt: (Indicate methods that will be used for NCA mandated evement at the course and (if applicable) general education levels
Departmental Exam	
Follow-on Tracking	
Standardized Test	
Portfolio Assessment	HERE HERE HERE HERE HERE HERE HERE HERE
1. Special Equipment/Facilities: (Che ☐ Lab equipment ☐ Computer Lab ☐ CD ROM's ☐	Off-Campus Sites Testing Center
Data Projector/Screen	Other Supplied by Local 190
⊠VCR	Other
TV Monitor	Other

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2. Texts: (Please indicate if no text is required.)

Title: UA materials supplied by Local 190	
Author: United Association	Copyright Yr:
Publisher:	Est. Cost:
Title:	
Author:	Copyright Yr:
Publisher:	Est. Cost:
Title:	
Author:	Copyright Yr:
Publisher:	Est. Cost:
Title:	
Author:	Conveight Vr.
Publisher:	Est. Cost:
Additional Texts:	
5. Computer Software that will be used: Title/Name	Location
6. Audio/Visual Materials that will be used: (e.g. films,	video tapes, slides, audio tapes, CDs, etc.) Location