

# SMJUHSD Course Description

(Must be accompanied by a Course Adoption Form)

<b>Full Course Title:</b>					
<b>School Associated with course:</b>		<b>DHS</b>	<b>ERHS</b>	<b>PVHS</b>	<b>SMHS</b>
<b>School Contact</b>					
<b>Name:</b>		<b>Title/Position:</b>			
<b>E-mail:</b>		<b>Phone:</b>		<b>Ext:</b>	
<b>Department:</b>			<b>Transcript Course Code(s) / Number(s):</b>		
<b>Subject Area:</b>					
<input type="checkbox"/> English Requirement	<input type="checkbox"/> Mathematics	<input type="checkbox"/> Foreign Language			
<input type="checkbox"/> World History	<input type="checkbox"/> Physical Science	<input type="checkbox"/> CTE			
<input type="checkbox"/> US History	<input type="checkbox"/> Life Science	<input type="checkbox"/> Health			
<input type="checkbox"/> Government	<input type="checkbox"/> Physical Education	<input type="checkbox"/> Elective			
<input type="checkbox"/> Economics	<input type="checkbox"/> Visual & Performing Arts				
<b>Grade Level(s)</b>			<b>Unit Value</b>		
<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12			<input type="checkbox"/> Semester (5 units)		
<b>Vocational Education (CTE)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Year A/B (5 units per semester)		
Career Pathway:			<input type="checkbox"/> Year A/B (two-period course, 10 units per semester)		
Industrial Sector:					
<input type="checkbox"/> Concentrator <input type="checkbox"/> Completer					
<b>Pre-Requisites:</b>			<b>Co-Requisites:</b>		
<b>Course Purpose:</b> <i>What is the purpose of this course?</i>					

## B. COURSE CONTENT

**Course Outline:** *A detailed descriptive summary of all topics covered. All historical knowledge is expected to be empirically based, give examples. (i.e. California State Standards).*

<b>Book Title:</b>	<b>Course:</b>
<b>Type of book adoption request:</b> <input type="checkbox"/> Basic/Multiple Textbook <input type="checkbox"/> Supplementary Textbook <input type="checkbox"/> Reference Book <input type="checkbox"/> Curriculum Software <input type="checkbox"/> NEW <input type="checkbox"/> REPLACE <b>Aligned with Standards?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Author:</b> _____	<b>Replacement for</b> ( <i>Book title &amp; copyright</i> ): _____ _____ _____ <b>Edition:</b> _____ <b>Publisher:</b> _____ <b>Copyright:</b> _____ <b>Student's Edition:</b> List Price: \$ _____ ISBN #: _____ <b>Teacher's Edition:</b> List Price: \$ _____ ISBN #: _____

<b>Book Title:</b>	<b>Course:</b>
<b>Type of book adoption request:</b> <input type="checkbox"/> Basic/Multiple Textbook <input type="checkbox"/> Supplementary Textbook <input type="checkbox"/> Reference Book <input type="checkbox"/> Curriculum Software <input type="checkbox"/> NEW <input type="checkbox"/> REPLACE <b>Aligned with Standards?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Author:</b> _____	<b>Replacement for</b> ( <i>Book title &amp; copyright</i> ): _____ _____ _____ <b>Edition:</b> _____ <b>Publisher:</b> _____ <b>Copyright:</b> _____ <b>Student's Edition:</b> List Price: \$ _____ ISBN #: _____ <b>Teacher's Edition:</b> List Price: \$ _____ ISBN #: _____

<b>Book Title:</b>	<b>Course:</b>
<b>Type of book adoption request:</b> <input type="checkbox"/> Basic/Multiple Textbook <input type="checkbox"/> Supplementary Textbook <input type="checkbox"/> Reference Book <input type="checkbox"/> Curriculum Software <input type="checkbox"/> NEW <input type="checkbox"/> REPLACE <b>Aligned with Standards?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Author:</b> _____	<b>Replacement for</b> ( <i>Book title &amp; copyright</i> ): _____ _____ _____ <b>Edition:</b> _____ <b>Publisher:</b> _____ <b>Copyright:</b> _____ <b>Student's Edition:</b> List Price: \$ _____ ISBN #: _____ <b>Teacher's Edition:</b> List Price: \$ _____ ISBN #: _____

**The following teacher has reviewed the above text(s) and finds it appropriate for the course.**

\_\_\_\_\_  
 Recommending Teacher Signature      School      Date

**Supplemental Instructional Material:** *Please Describe. If using online text or non-standard material, please provide the title of the material or webpage and the URL link.*

**Instructional Methods and/or Strategies:**

**Assessment Methods and/or Tools:**

**Activities:** *(If applicable)*

**Certificate:** *(If applicable)*