

PROGRAM/COURSE INFORMATION

Complete a separate form for each program or course offered by school. Reproduce this page in sufficient quantities to have one for each occupational program/course. Place all attachments behind this page. Prepare separate pages when programs/course differ in time of training for day, evening, and weekends; differ in designated length by hours, credits, lessons and weeks; differ in method of delivery of instruction for residential, on-line, and home-study/correspondence.

Program/Course Name: _____

(The program/course name must be the same as listed on the Program/Course List (HPOSA AP Page 17), Enrollment Agreement/Contract and School Catalog.)

Attach the program/course curriculum, which will include an overview of courses offered in program, as well as, course/program outline syllabus, overview of courses with hours/credits/lessons and explanation of .

1. Indicate the method of delivery of course/program instruction:

_____ Residential _____ On-line _____ Home-study/Correspondence _____ Lessons

2. Indicate length and category of course/program offered:

_____ Clock Hours _____ Credit Hours _____ Quarter Credit Hours _____ Lessons

Indicate break down by lecture/class _____ Lab _____ Clinical _____ Externship _____ Shop _____

3. Indicate Time course/program offered:

_____ Day _____ Evening _____ Weekend _____ Sat. _____ Sun. _____ Lessons

4. Indicate when classes meet (example Mon and Wed) _____

5. Indicate hours classes meet (example 9:00 am to 2:00 pm) _____

6. Indicate course/program length in Hours per week _____

7. Indicate number of weeks in course/program _____ and number of Modules _____ if used.

8. Indicate maximum class size: classroom/lecture _____; lab _____ shop _____

9. **Attach a list indicating what equipment is available to teach this program/course.**

10. Describe below or attach the admission requirements for this program/course.

11. List below the total cost of program course/program:

Tuition	\$ _____
Application Fee (non-refundable yes__no__)	_____
Registration Fee (non-refundable yes__no__)	_____
Supplies	_____
Equipment	_____
Text books	_____
Other _____(Specify)	_____
Total:	\$ _____