

**Request for Graduate Course Addition**

1. Prepare one paper copy with all signatures and supporting material and forward to the Graduate Council Chair.
2. E-mail one identical PDF copy to the Graduate Council Chair. If attachments included, please merge into a single file.
3. **The Graduate Council cannot process this application until it has received both the PDF copy and the signed hard copy.**

College: CITE

Dept/Division: TM

Alpha Designator/Number: TM698

 Graded  CR/NC

Contact Person: Tracy Christofero

Phone: 304-746-2078

**NEW COURSE DATA:**

New Course Title: Technology Management Internship

Alpha Designator/Number:

T M 6 9 8

Title Abbreviation:

T M I n t e r n s h i p

(Limit of 25 characters and spaces)

Course Catalog Description:  
(Limit of 30 words)

Supervised on-the-job experience. The student will work in a technology company or technical department within an organization. (PR: Permission)

Co-requisite(s):

First Term to be Offered: Summer 2017

Prerequisite(s): Permission

Credit Hours: 3

Course(s) being deleted in place of this addition (must submit course deletion form):

Signatures: if disapproved at any level, do not sign. Return to previous signer with recommendation attached.

Dept. Chair/Division Head _____	Date _____
Registrar _____	Date _____
College Curriculum Chair+ _____	Date _____
Graduate Council Chair _____	Date _____

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College: CITE

Department/Division: TM

Alpha Designator/Number: TM698

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Provide complete information regarding the new course addition for each topic listed below. Before routing this form, a complete syllabus also must be attached addressing the items listed on the first page of this form.

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1. FACULTY: Identify by name the faculty in your department/division who may teach this course.

Dr. Tracy Christofeo

2. DUPLICATION: If a question of possible duplication occurs, attach a copy of the correspondence sent to the appropriate department(s) describing the proposal. Enter "**Not Applicable**" if not applicable.

N/A

3. REQUIRED COURSE: If this course will be required by another department(s), identify it/them by name. Enter "**Not Applicable**" if not applicable.

N/A

4. AGREEMENTS: If there are any agreements required to provide clinical experiences, attach the details and the signed agreement. Enter "**Not Applicable**" if not applicable.

N/A

5. ADDITIONAL RESOURCE REQUIREMENTS: If your department requires additional faculty, equipment, or specialized materials to teach this course, attach an estimate of the time and money required to secure these items. (Note: Approval of this form does not imply approval for additional resources.) Enter "**Not Applicable**" if not applicable.

N/A

6. COURSE OBJECTIVES: (May be submitted as a separate document)

Upon completion of this course, the student will:

- Analyze the experience in writing
- Provide weekly status reports
- Complete a final project and report

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### 7. COURSE OUTLINE (May be submitted as a separate document)

The student will work for the organization for a pre-determined number of hours per week during the semester.

Weekly status reports are due to the academic advisor to include the week's assignments and activities; analysis of the work/assignments; personal reflections of the experience; and any problems, concerns or questions that need to be addressed

A course project will be determined by the organization, student and professor.

The final project report will be submitted before the end of the semester

The advisor will follow-up with the company contact for their evaluation of the student's performance.

### 8. SAMPLE TEXT(S) WITH AUTHOR(S) AND PUBLICATION DATES (May be submitted as a separate document)

N/A

### 9. EXAMPLE OF INSTRUCTIONAL METHODS (Lecture, lab, internship)

Internship

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### 10. EXAMPLE EVALUATION METHODS (CHAPTER, MIDTERM, FINAL, PROJECTS, ETC.)

Weekly status reports  
Final project report  
Evaluation by the company contact

### 11. ADDITIONAL GRADUATE REQUIREMENTS IF LISTED AS AN UNDERGRADUATE/GRADUATE COURSE

N/A

### 12. PROVIDE COMPLETE BIBLIOGRAPHY (May be submitted as a separate document)

N/A

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Please insert in the text box below your course summary information for the Graduate Council agenda. Please enter the information exactly in this way (including headings):

Department:  
Course Number and Title:  
Catalog Description:  
Prerequisites:  
First Term Offered:  
Credit Hours:

Department: Technology Management  
Course Number and Title: TM698 Technology Management Internship  
Catalog Description: Supervised on-the-job experience. The student will work in a technology company or technical department within an organization. (PR: Permission)  
Prerequisites: Permission  
First Term Offered: Summer 2017  
Credit Hours: 3