

Cooperative Agreement Program

Oklahoma State Regents for Higher Education

COOPERATIVE AGREEMENT PROGRAM REQUEST FORM

Institution Submitting Proposal

Program name and State Regents' program code

Technology Center

Date of Governing Board Approval: _____

Signature of President: _____ **Date:** _____

Signature of Superintendent: _____ **Date:** _____

Cooperative Agreement Program (CAP) Request Form

The proposal for a CAP should provide the following information.

NOTE: INFORMATION NOT INCLUDED IN THE COOPERATIVE AGREEMENT PROGRAM PROPOSAL MAY CAUSE A DELAY IN PROCESSING.

1. A CAP signature page (president and superintendent) that includes the names of the participating college and technology center(s).
2. Name of degree program(s) toward which credit will be awarded, including the State Regents' program code.

(The size of the box is NOT an indicator of the amount of information required to address the request. Please include as much information as necessary [the boxes will expand].)

3. Titles of modules, courses, or programs for which approval is sought.

4. List the equivalent college course or courses. (The courses are to be listed in the technology course crosswalk.)

Higher Education Institution Name:	Technology Center Name:
Name of module, course or program of instruction	
Higher Education Course:	Technology Center Course:
Higher Education Course:	Technology Center Course:

5. Detail the maximum number of college credit hours to be articulated and the maximum awarded toward the degree for work completed at the technology center.

Total Articulated:
Total that can be applied to the degree:

6. List the clock hours of classroom and laboratory instruction for each credit hour to be awarded. (Example of required documentation; actual document can be attached separately.)

Course Number	Title & Description	Total Clock Hours	Theory Hours	Lab/Shop Hours

7. Description of the classroom and laboratory facilities and how they will be utilized.

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8. State if general education courses will be offered as part of the CAP by the college at the technology center, on the college campus or via electronic delivery.

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9. Academic credentials of faculty responsible for classroom and laboratory experiences.

<i>(Include a summary document here. Full vitae, resume and certifications must be included as attachments.)</i>
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10. Outline the steps that will be taken to assure quality academic programming pursuant to the CAP.

11. Describe the criteria for assessment of student outcomes in each module, course, and program.

12. To maintain quality courses, the higher education institution will designate an appropriate individual to work as liaison between the technology center(s) and higher education institution. Provide the name of the individual as well as the criteria and procedures that will be used for an annual evaluation of courses.

13. Describe the student support service available to students enrolled in the CAP.

14. Outline the financial arrangements between the college and the area technology center if different from the Alliance Agreement; this should include student tuition and other charges.

15. State if high school students may be enrolled in the CAP and/or any restriction based on age of students.