

The logo for Guam Community College (GCC) features the letters 'GCC' in a large, bold, yellow serif font. Below the letters is a blue horizontal bar with the text 'GUAM COMMUNITY COLLEGE' in white, uppercase, sans-serif font. Underneath the bar is a thin white line, followed by the Chamorro name 'Kulehon Kumunidát Guáhan' in a blue, italicized, sans-serif font. The entire logo is set against a white background with a subtle drop shadow.

GCC

GUAM COMMUNITY COLLEGE

Kulehon Kumunidát Guáhan

**Academic Affairs Division
Guam Community College**

Continuing Education & Workforce Development

Standard Operating Procedures

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OVERVIEW



GUAM COMMUNITY COLLEGE
Continuing Education & Workforce Development
Standard Operating Procedures for Special Projects

GCC MISSION STATEMENT

Guam Community College is a leader in career and technical workforce development, providing the highest quality, student-centered education and job training in Micronesia.

CEWD DESCRIPTION

The Continuing Education & Workforce Development (CEWD) provides programs, courses, events, and workforce development activities to enrich the lives of individuals and improve the quality of living in our community. The programs, courses, events, and workforce development activities also known as Special Projects offered contribute to an individual’s personal growth and development, enhanced professional skills, work readiness, and academic advancement.

CEWD offers noncredit and Continuing Education Units (CEUs) as well as academic undergraduate and graduate credit courses by special arrangement. CEWD has the flexibility to offer Special Projects outside of the regular semester schedule, either on-campus or off-campus to meet the needs of the community.

Special Projects for training requested by External Customers (e.g., Government of Guam agencies, private businesses or entities, or community organizations) may be arranged with the College through a Memorandum of Agreement (MOA) or Memorandum of Understanding (MOU). In addition, CEWD assists with coordinating community-sponsored conferences, seminars, and workshops that utilize campus facilities.

CEWD CATEGORIES

The Special Projects offered through CEWD fall under four main categories and each department is required to adhere to the policy and procedures of each category for which the course, event or training is identified. The four main categories are as follows:

- a. *Category I:* *Credit Course*
- b. *Category II:* *Continuing Education Unit (CEU) or Noncredit Course*
- c. *Category III:* *Event*
- d. *Category IV:* *Training Program for MOA/MOU or Contract Project*

Category I: Credit Course

A course offered for academic credit falls under Category I. There are two sub-categories:

- a. ***Regular/Credit Course:*** This course may be listed in the GCC catalog or is a newly approved credit course being offered through CEWD while going through the Learning Outcome Committee approval process.
- b. ***Professional Development Course:*** This course is offered with a designation of PD, for professional development for the purpose of re-certification or to meet requirements for a course needed for employment purposes at GCC or at other institutions/companies. The course can be

taken by any student. This course cannot now or ever be used toward a degree or certificate at GCC. A student is required to sign a *waiver form* acknowledging an understanding that this course cannot now or ever be used toward a degree or certificate program at GCC.

The participant is considered a *student* and is required to adhere to the GCC Admissions & Registration policies and procedures to enroll in the course. A student participating in a special cohort/cycle training program is required to adhere to the GCC Admissions & Registration policies and procedures to enroll in the course. For a credit course offering of less than 30 days, the participant is considered a *trainee* and is not subject to the same requirements as a student but is required to adhere to the course registration with waiver standards for transcript and recording purposes. Please refer to GCC's catalog for a list of approved credit courses and to CEWD's Catalog for approved Professional Development courses.

Category II: Continuing Education Unit (CEU) Course or Noncredit Course

A course offering Continuing Education Unit(s) (CEUs) falls under Category II. This CEU course supports the individual to maintain professional skill growth by meeting standards established through certification, re-certification, licensure, board, law, or human resources/employment requirements. The course requires an approved CEU course guide in order to award a continuing education unit. ***Please refer to CEWD's catalog for approved CEU and noncredit courses.***

The Continuing Education Unit (CEU) is a nationally recognized measure of participation in an approved noncredit continuing education program. One Continuing Education Unit (1.0) is defined as "ten (10) contact hours of participation in an organized continuing education experience under responsible sponsorship, capable direction, and qualified instruction. A CEU Request Form must be submitted with the CEU recording fee for the approved CEU to be awarded. The successful completer receives a Certificate of Enrichment for CEUs earned and the CEUs are recorded with the Admissions & Registration Office's central repository.

For a CEU course offering of more than 30 consecutive days, the participant is considered a *student* and is required to adhere to the GCC Admissions & Registration policies and procedures to enroll in the course. For a CEU course offering of less than 30 days, the participant is considered a *trainee* and is not subject to the same requirements as a student but is required to adhere to the CEU course registration with waiver standards for transcript and recording purposes.

Requests for CEU awards for professional training projects funded by an external organization, agency, or department are required to adhere to the same standard and process required for a CEU course offering. The professional trainer and sponsoring external organization, agency, or department are also required to complete the CEWD Trainer of Record for Noncredit Course Form which shall be approved by the Vice President for Academic Affairs (VPAA). A CEWD course fee and CEU Recording fee shall apply.

Category III: Event/Workforce Development

The Event is a noncredit offering and falls under Category III. The Event is offered in various training or activity formats and is popular and valuable to an individual's personal growth and development, enhanced professional skills, and supports continual workforce readiness professional development. The Event offering may be a testing environment, a workshop, a seminar, a class or other activity offering not requiring a CEU or transcript recording. The participant is considered a *trainee* and is required to adhere to the Event registration standard as required per activity (e.g. sign-in/sign-out sheet, list of trainees, event registration form, etc.).

Category IV: Training Program for MOA/MOU or External Training Project

The special project for workforce development training requested and funded by a 3rd party (e.g. agency, department, organization, company, etc.) for personnel or clientele training will be addressed on a case by case basis with regard to the implementation requirements relative to the number of students/trainees covered under the program or project.

Definitions: *Students* are individuals in courses longer than 30 days. *Trainees* are individuals in courses less than 30 days. *Cohorts* are special programs wherein students attend a defined set of courses together. *Non-Cohorts* are special programs wherein students/trainees are not required to attend all courses in the program.

CEWD GUIDELINES FOR DEPARTMENT SUBMITTING

COURSE/EVENT PERMISSION FORMS & SUPPORTING DOCUMENTS

The following guidelines are specific to an approved Credit course, a CEU/noncredit course, or an Event being offered through CEWD as outlined under the different categories.

MOA/MOU INFORMATION & COST WORKSHEET

The MOA/MOU worksheet (see sample form) must be completed in order to develop the contract between GCC and the 3rd party payer (e.g., agency, department, company, etc.) or a consultant/vendor service outside the Human Resources Office (HRO) requirements (e.g., trainer, instructor, etc.).

CE-SPECIFIC COURSE APPROVAL FORM (Credit)

The CE-Specific Course Approval Form (see sample form) must be completed and approved by the requesting Department Chairperson (DC), CEWD Assistant Director, appropriate Dean, Vice President for Academic Affairs, Registrar, and the HRO. The CE-Specific Course Approval Form is used to create new or revise existing course curriculum for credit. Upon submission and approval, all CE-Specific Course Approval Forms are archived by the Academic Affairs Division.

CE-SPECIFIC CEU or NONCREDIT COURSE APPROVAL/MODIFICATION FORM

The CE-Specific CEU or Noncredit Course Approval/Modification Form (see sample form) must be completed and approved by the requesting Department Chairperson, CEWD Assistant Director, appropriate Dean, Vice President for Academic Affairs, Registrar, and the HRO. The CE-Specific CEU or Noncredit Course Approval/Modification Form (see sample form) is used to create new or revise course curriculum for CEUs or for a noncredit course. Upon submission and approval, all CE-Specific CEU/Noncredit Course Approval Forms are archived by the Academic Affairs Division.

COURSE PERMISSION FORM OR EVENT PERMISSION FORM

- a. CEWD Form (For CEWD use only):** The CEWD Course/Event Permission Form along with all pertinent supporting documents must be completed and approved by the requesting Program Manager, CEWD Assistant Director, Vice President for Academic Affairs, Registrar, and the HRO. The Course Permission Form is used for special projects initiated by CEWD under Category I and Category II courses. The Event Permission Form is used for special projects under Category III.

NOTE: An approved course guide must be in place in order to submit a CPF for approval.

- b. Department Form:** The Course/Event Permission Form (see sample form) along with all pertinent supporting documents must be completed and approved by the requesting Department Chairperson (s) or Program Manager, CEWD Assistant Director, appropriate Dean, Vice President for Academic Affairs, Registrar, and the HRO. The Course Permission Form is used for special projects under Category I and Category II courses. The Event Permission Form is used for special projects under Category III. **NOTE: An approved course guide must be in place in order to submit a CPF for approval. The Department Chairperson (Requestor) who is requesting the instructional services of a faculty who is under the purview of another Department Chairperson (Oversight) must secure signature approval of the DC (Oversight) for faculty to provide instructional services.**

AMENDMENT FORM

The Amendment Form (see sample form) is used and must be submitted to initiate any change to the approved CPF or EPF (e.g., faculty, location, date, time, etc.). This form allows the department and the approving signatory to monitor and document the activity occurring during an approved special project in order to address necessary adjustments for improvement to the course or event offering. **NOTE:** A copy of the approved original CPF or EPF must be attached. For location and schedule changes, *only* the CEWD Assistant Director's signature is required for approval.

BUDGET FORM

A Special Project/Grant Budget (SP/GB) Form (see sample form) must be signed by requestor and submitted along with the CPF or EPF for approval by the CEWD Assistant Director and Vice President for Finance and Administration Office in order for a Revenue and Expenditure FOAPAL to be created. A budget calculation should be attached to the budget form. For projects requiring an MOA/MOU, the MOA/MOU must be in place and approved and a copy attached to the budget form before the FOAPAL is created. **NOTE: Typically, all expenditures and documentation associated with the project must be completed no later than 10 days after the project's conclusion.**

a. Budget: Credit

The SP/GB must include the expense for tuition, student fees, and course fees and include a 25% indirect cost (if applicable). A budget calculation should be attached to the budget form. Adjunct faculty salary and benefits for these courses will be paid through the Adjunct Pay FOAPAL. If a course fee is charged, there should not be supply/materials expense included in the budget.

Invoice and Payment

To generate an invoice for payment by a 3rd Party, the Department must submit a memo to Accounts Receivable listing the Banner number, student name, course alpha/title, cost per student, and total cost for course, and name/address of the 3rd Party to bill for the course. The Department must submit a memo to Accounts Receivable with the same student information as above in order to reverse the student charges on the student accounts paid for by the 3rd Party.

b. Budget: CEU or Noncredit

The SP/GB must include an outline of the estimated revenue and expenses associated with the project and include a 40% indirect cost. The total budget for direct expenditures must not exceed 60% of budget revenues. Additionally, the salary and benefits category must reflect the appropriate hourly rate and reflect 35% for benefits. The CEWD Adjunct Pay Rate is a flat-rate of \$25 per hour. A \$20 flat-fee is charged for recording CEUs. For projects requiring an MOA/MOU, the MOA/MOU must be

in place and approved and a copy attached to the budget form before the FOAPAL is created). For projects requiring an MOA/MOU, the MOA/MOU must be in place and approved and a copy attached to the budget form before the FOAPAL is created.

Invoice and Payment

To generate an invoice for payment by 3rd Party, the Department must submit a memo to Accounts Receivable listing the Banner number, student name, course alpha/title, cost per student, and total cost for course, and name/address of the 3rd Party to bill for the course. The Department must submit a memo to Accounts Receivable with the same student information as above in order to reverse the student charges on the student accounts paid for by the 3rd Party.

BUDGET REVISION

A completed SP/GB Form, with the "REVISION" indicator check marked, must be submitted to CEWD to route to the accountant for any budget changes or adjustments. Budget revisions must be signed by the requestor and submitted to CEWD for approval by the CEWD Assistant Director and the Vice President for Finance and Administration Office before the course ends.

SYLLABUS, FLYER/AGENDA

A syllabus (see sample form) must accompany the Course Permission Form. The Student Learning Outcomes (SLOs) need to be clearly identified. The curriculum description and SLOs must be the same as noted in the college catalog and curriculum guide. A syllabus or flyer/agenda indicating day, date, time, and location must be included with the Event Permission Form.

FACULTY

If the instructor teaching the course is a full time faculty, a current Faculty Workload Form is to be completed by the Department Chairperson and must be attached to the Course/Event Permission Form for the respective Dean's review and approval of the Course Permission Form. The maximum class limit is usually thirty (30) participants with some classes being limited because of equipment or room size.

NOTE: The Department Chairperson (Requestor) must secure signature approval of the Department Chairperson (Oversight) for faculty to provide instructional services.

All credit courses shall be paid in accordance with the College's current adjunct salary schedule. Instructors hired for noncredit or CEU courses shall be compensated at the CEWD Adjunct Pay Rate which is a flat-rate of \$25 per hour. *Preparation time:* instructors teaching between 4 to 14 hours may be compensated for two (2) hours of preparation time and instructors teaching 15 to 60 hours may be compensated for four (4) hours of preparation time. Preparation time must be included in the course budget but is not automatically given to the instructor. Preparation time is subject to the CEWD Assistant Director's approval, and can only be approved if it is the instructor's first time teaching a particular course. If, at any time, additional preparation time is required for a related course, justification must be provided and submitted in writing for review and approval/disapproval by the CEWD Assistant Director **prior** to submission of the Course Permission Form or Event Permission Form.

If the instructor is to be hired as an Adjunct faculty, the instructor must meet all the requirements set forth by the HRO, including a current employment application, transcripts, certifications, police and court clearances. Police and court clearances must be submitted within 30 days of issuance or as informed by the HRO. In addition, adjunct faculty must receive clearance by the GCC Health Nurse, especially

regarding immunization requirements. The Department Chairperson/Program Manager will ensure any adjunct faculty is fully processed prior to the start date of any activity.

ADJUNCT FACULTY COMMITMENT FORM & ADJUNCT FACULTY CLEARANCE FORM

The Department Chairperson/Program Manager is responsible for informing the instructor that payment will occur only when the Adjunct Faculty Commitment Form is certified prior to the course start, the course has been completed, and the CEWD Adjunct Faculty Clearance Form is signed and submitted to CEWD to close out the activity for the course.

TRAINER OF RECORD FOR NONCREDIT COURSE

For a CEU course sponsored and funded by an external organization (e.g., agency, department, community/professional organization, or company) and approved by the VPAA, the professional trainer and the sponsoring external organization must complete the Trainer of Record for Noncredit Course Form (see sample form). The sponsoring external organization is responsible to certify the professional trainer(s) credentials in order to be considered for review and approval by the Vice President for Academic Affairs approval for the CEU award for the course offering.

REGISTRATION

The **Personal Information Form** must be filled out completely, signed, and dated by each participant and submitted to the Admissions & Registration Office. The participant must show valid photo identification with date of birth to generate a GCC Student Banner identification number. If a participant is a returning GCC student with a current Banner number, indicate the Banner number on the form.

The **GCC Registration Form** must be submitted to CEWD by the department (requestor) or participant at least 3 day(s) prior to the start date of a course to allow time for registration processing. Class rosters and grade sheets are generated utilizing these forms. A student/trainee must see the CEWD staff before making payment. CEWD must ensure the participant is clear of all Business or Health Holds in order for the participant to be registered for the course and make payment at the GCC Cashier's Office.

a. Business Hold on Student/Trainee Account

If the participant has a Business Hold for a past due balance on the student account, the participant must comply with the payment policy and obtain Business Hold clearance from the General Accounting Supervisor or the Controller in the Finance and Administration Division.

b. Health Hold on Student/Trainee Account

If the participant has a Health Hold on the student account, the participant must comply with the health clearance policy and obtain a Health Hold clearance from the GCC Health Nurse at the Student Health Center.

EVALUATION FORM

Upon completion of the course offering, the Department must administer the Evaluation Form (see sample form) to assess the instructional delivery and knowledge gained by the student/trainee for the course/event offered. The Department is responsible to provide an **Evaluation (Assessment) Report** at the end of each course offering along with the completed **Adjunct Faculty Clearance Form** in order to close out the activity for the course.

STUDENT/TRAINEE WAIVER FORM

The student/trainee is required to complete and submit the Student/Trainee Waiver Form (see sample form) acknowledging and understanding that the professional development course offered cannot now or ever be used toward a degree or certificate program at GCC.

CEU REQUEST FORM

The student/trainee is required to complete and submit the CEU Request Form (see sample form) to CEWD and to make payment of the \$20 CEU recording fee at the GCC Cashier's Office in order for the CEU to be awarded for the approved CEU course offering.

COURSE ARCHIVAL & COURSE REINSTITUTION MEMORANDUM

If a course is no longer to be offered at the College, e.g., it has not been offered for several years and is to be permanently removed from program offerings, the course may be archived from the catalog by submitting a *Course Archival Memorandum* (see sample form). The archived course is removed from the Course Description section and/or the General Education list in the CEWD Catalog and any program narrative or list of program requirements in the Catalog upon approval.

Conversely, if an archived course is deemed relevant and a department wishes to reinstitute that course, the *Course Reinstitution Memo* (see sample form) must be completed and processed for approval.

COURSE REINSTITUTION & COURSE REINSTITUTION MEMORANDUM

If a course is no longer offered at the College due to its previous archival, the course may be reinstated to the catalog by submitting a *Course Reinstitution Memorandum* (see sample form). The archived course is reinstated to the Course Description section and/or the General Education list in the CEWD Catalog and any program narrative or list of program requirements in the Catalog upon approval.

CERTIFICATE REPLACEMENT FEE

Should a student/participant wish to receive an additional copy of a certificate previously earned through the CEWD department, a *certificate replacement fee* of \$15 (pick up at GCC) or \$35 (mailed to requestor) will be assessed.

PROJECT OR PROGRAM INCENTIVE FUNDS

CEU OR NON CREDIT COURSE

An Indirect Cost amount of 40% must be included in the SP/GB. The formula to be used for distribution of incentive funds is 40% of the total revenue, to include the following breakdown:

- 15% Institution Incentive Account
- 15% Department Incentive Account
- 10% Continuing Education

CEWD CREDIT COURSE

An incentive of 25% will be included in the tuition/fee costs for CE Credit courses.

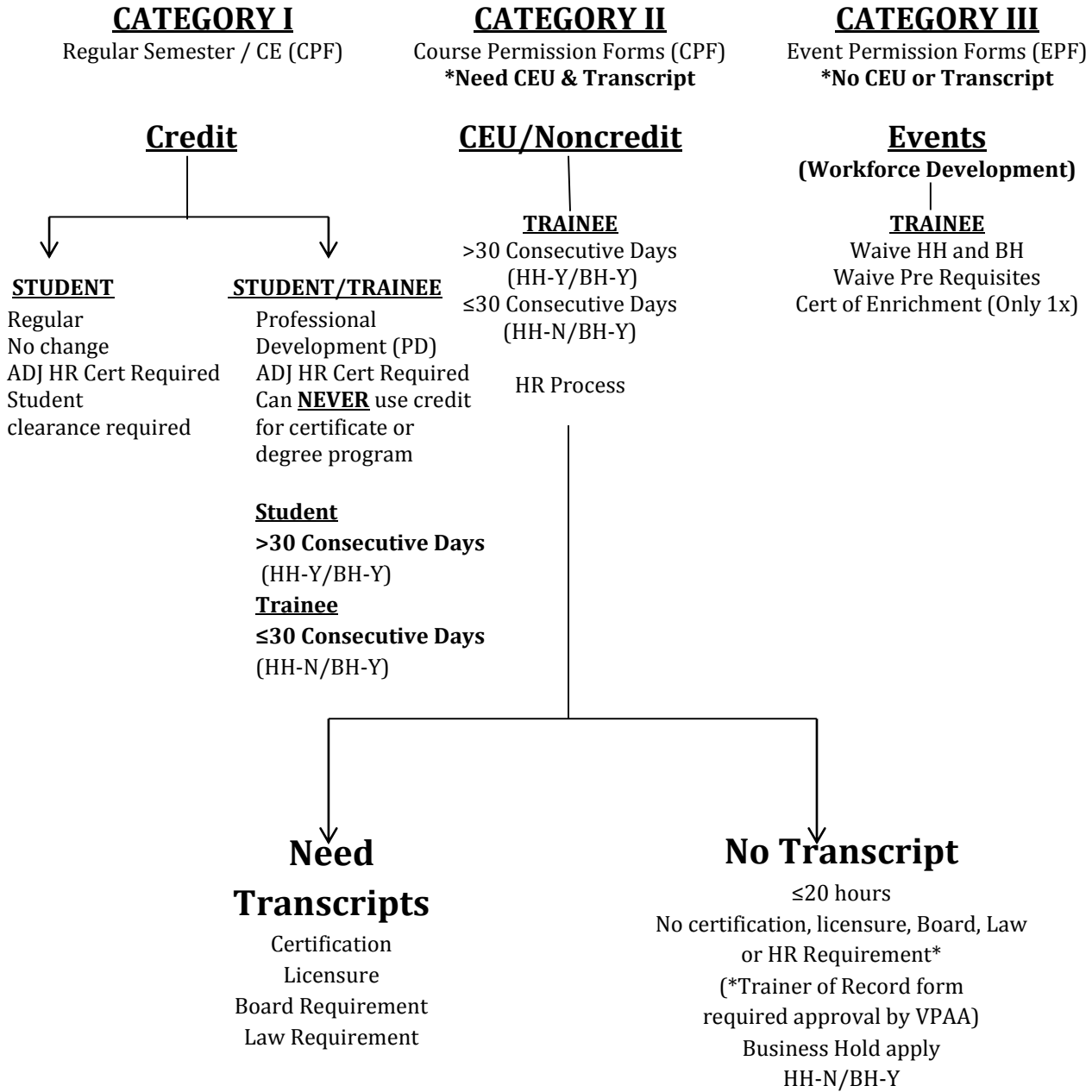
- 15% Department Incentive Account
- 10% Continuing Education

The allocation of department incentive funds will take place after all revenues are collected. Each department will have a period of two fiscal years to use monies earned as incentives. NOTE: If departments fail to utilize their incentive funds by the end of the second fiscal year, the funds will revert to GCC's non-appropriated fund.



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT (CEWD)

CATEGORY REQUIREMENTS FLOWCHART



CATEGORY IV - Special Project requests to be reviewed by CEWD Assistant Director, Registrar, HR Administrator, VP for Finance and Administration, and VP for Academic Affairs. Requirements for cohorts: BH-Y, HH-Y; non-cohorts: BH-Y, HH-N.

***Legend:** *Students* are individuals in courses longer than 30 days. *Trainees* are individuals in courses less than 30 days. *Cohorts* are special programs wherein students attend a defined set of courses together. *Non-Cohorts* are special programs wherein students/trainees are not required to attend all courses in the program. *HH-Y* (Health Hold Clearance Required); *HH-N* (Health Hold Clearance Not Required); *BH-Y* (Business Hold Clearance Required); *BH-N* (Business Hold Clearance Not Required); *ADJ HR* (Adjunct Human Resources Certification Required)



CEWD SOP PROCESS



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
Standard Operating Procedure
COURSE/EVENT PERMISSION FORM
DEPARTMENT PROCESS

**A CE SPECIFIC COURSE APPROVAL FORM (CREDIT OR CEU) MUST BE APPROVED PRIOR TO CPF/EPF APPROVAL.*

**A CONTRACT, MOU, OR MOA MUST BE APPROVED PRIOR TO CPF/EPF APPROVAL*

1. * DEPARTMENT originates the creation of Course or Event Permission Form for an APPROVED course.

Attachment(s) for CPF:

- Budget Form
- Syllabus
- Evaluation Form
- Faculty Workload Form (if applicable)
- Adjunct Faculty Clearance Form
- Adjunct Faculty Commitment Form

Attachment(s) for EPF:

- Budget Form
- Flyer or Agenda with Day/Date/Time
- Evaluation Form
- Faculty Workload Form (if applicable)
- Adjunct Faculty Clearance Form
- Adjunct Faculty Commitment Form

Additional Documents:

- MOA or MOU (if applicable)
- CEU Request Form for CEU course
- Trainer of Record Form (TOR)
- Breakdown of instructional schedule (contact hours, hourly pay rate, salary & benefits) for course with more than 1 Adjunct Instructor
- Other supporting documents as requested

2. DEPARTMENT routes original to CEWD to check for completion, then to Dean's office for review of faculty load and routes packet back to CEWD after Dean's approval. **Note: DC Requestor must secure DC (Oversight) for Faculty approval.**

3. CEWD assigns **control number** and **detail code** and reviews **budget/documents** for **Assistant Director's** signature approval.

4. CEWD makes two (2) complete copies:

- a) Copy for routing and tracking
- b) Original for signature(s)

5. CEWD routes to **Dean's Office** for signature.

6. CEWD routes to **Vice President for Academic Affairs** for signature.

7. CEWD picks up and routes to **Registrar's Office** for signature.

8. CEWD picks up and routes to **Accountant** for FOAP.

9. CEWD picks up and routes:

- Original to CEWD office
- b) Copy to Human Resources
- c) Copy to originating dept./Vice President for Academic Affairs' Office.

10. DEPARTMENT – Registration Process

- Student's must complete and submit a **Personal Information Form** at **Admissions Department** with a valid Identification Card **in person** to create or update their account.
- Student completes, signs, and submits a **Registration** and **CEU Request Form** for a CEU course to the respective Department for verification of accuracy.
- **Department** then submits verified forms to **CEWD** for processing.

11. DEPARTMENT – Class Activities

- Room Utilization
- Secure key for classroom
- Create roster / Sign in sheet
- Set up projector / lap top **(if applicable)**
- Prepare requisition(s) and invoice request
- Provide CEWD with final list of students to receive Certificates of Enrichment or Completion
- Ensures Instructor *inputs final grades* into Banner system
- Evaluation Form Administration
- Assessment Report of Evaluation Results

CEWD – Class Activities

- Banner entry:
 - Build course in Banner system
 - Registration of students in Banner system
 - Assess student charges in Banner system
 - Invoice generation – 3rd party
 - Adjunct pay/HRO Contract
 - Resolution of course/student processing
- Create Certificate of Enrichment or Completion
- Route for signatures
- Scan / Copy for certificate repository
- Distribute certificates to Department for dissemination (Department/Individual sign-off upon receipt)
- Verification Checklist for course offering

12. DEPARTMENT – Timesheet

- Student grades – in Banner system
- Assessment Report (including completed evaluation forms)
- Adjunct Faculty Clearance Form
- Instructor Timesheet and Adjunct Faculty Clearance Form to be forwarded to HRO
- Prep Time - Should be indicated on CPF/EPF, reflected on the budget and timesheet.

13. CEWD – Verification Checklist and Course Closure

- Staff sign-off



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
Standard Operation Procedure
AMENDMENT PROCESS

An Amendment Form must be submitted for approval should any change occur after the Course Permission / Event Permission Form has been approved.

1. DEPARTMENT originates the Amendment Form.

Any document(s) to justify the change. Justification may be provided in “comments” section of form or memo form.

2. CEWD routes original to Assistant Director for signature.

Assistant Director’s signature ONLY for location or schedule change

3. CEWD picks up and routes to Dean’s Office for signature for **Faculty Change**.

4. CEWD picks up and routes to Vice President for Academic Affairs for signature for **Faculty Change**.

5. CEWD will pick up and route to Registrar’s Office.

6. CEWD will pick up and route:

- a) Original to CEWD office
- b) Original to Accountant for budget certification
- c) Copy to Human Resources
- d) Copy to originating department



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
Standard Operation Procedure
SPECIAL PROJECT/GRANT BUDGET FORM
BUDGET PROCESS

1. DEPARTMENT originates the Budget Form for Credit, CEU, or Noncredit course to be included with the CPF/EPF.

- **PERSONNEL SERVICES**

- For personnel hire (F/T – P/T)
- Benefits
- Travel
- Contractual
- Supplies/Materials
- Equipment (IT)
- Miscellaneous (e.g., Tuition, Fees, Cert. Exam)
- Utilities
- Capital Outlay
- Indirect Cost Recovery
- Budget Worksheet

2. CEWD routes original to Assistant Director for signature.

3. CEWD routes original to Business Office to set up accounts. (Create FOAPAL)

4. CEWD picks up and routes to Vice President for Finance & Administration for signature.

5. CEWD will route:

- a) Original to CEWD office
- b) Original to accountant for budget certification
- c) Copy to originating department



**CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
PROCESS FOR AN EXTERNAL REQUEST FOR THE AWARD OF
CONTINUING EDUCATION UNITS (CEUs)**

INITIAL REQUEST FOR CEUs:

1. **EXTERNAL** request for CEU(s) by sponsors of training or event and payment of nonrefundable CEU Course Request Fee.
2. **REQUESTOR has QUALIFIED TRAINER** complete and sign the **Trainer of Record for Noncredit Course Form (TOR)** and **CE Specific CEU or Noncredit Course Form**.
3. **REQUESTOR** verifies the qualified Trainer's credentials and signs the **TOR**.
4. **REQUESTOR** submits the **TOR** and **CE Specific CEU or Noncredit Course Form** to CEWD (Room 2123) for review and approval/disapproval.

UPON APPROVAL OF TOR AND CEU COURSE FORM:

1. **REQUESTOR** provides daily training attendance sheet to CEWD for cross-verification of Participant's CEU Request.
2. **TRAINING PARTICIPANT** completes and submits GCC CEWD Registration Packet to CEWD, Room 2123 no later than 7 business days after the scheduled end date of the training/event completion. *(Sponsoring agency/company will be responsible for assuring that participants submit the required documents.)*

GCC CEWD REGISTRATION PACKET CONTENTS:

- a. Personal Information Form (a valid photo ID with birthdate must be presented for face-to-face verification by CEWD/Admissions)
- b. Registration Form
- c. CEWD Student CEU Request Form
- d. Registered Student makes payment of \$20 CEU Recording Fee at GCC Cashier's Office, Room 2119

GCC Cashier Hours of Operation:

Mon – Thurs 8:00am - 4:00pm
Friday 8:00am - 12:00pm

NOTE:

CEWD CEU Course Request Fee = \$350.00* | Repeat offering: \$175.00*

CEU Recording = \$20.00* per person.

***Fees subject to change and are nonrefundable.**

Contact Information:

Continuing Education & Workforce Development
Office Room # 2123
Student Support & Administration Building 2000



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

**Standard Operation Procedure
COURSE ARCHIVAL/ REINSTITUTION MEMORANDUM PROCESS**

<p>1. The Author or Department Chair conducts a Review of Course Guide and any other course evaluation procedures necessary to decide whether a current course should be deleted or a previously archived course should be reinstated (retrieved).</p>
<p>2. The Author or Department Chair prepares the Archival Memorandum or Reinstitution Memorandum and signs the cover sheet. The approved Course Guide or other most recently approved course form is attached. A digital copy containing the Archival Memorandum or Reinstitution Memorandum is prepared.</p>
<p>3. The Author or Department Chair submits the Archival Memorandum or Reinstitution Memorandum and attachments to the department for review and approval. The Department reviews the Archival Memorandum for purpose, content, scope, sequence and detail. When approved, the Department Chair signs the cover sheet and forwards the following to the Registrar:</p> <ul style="list-style-type: none">• the original printed Archival Memorandum,• the attached Course Guide or most recently approved course guide,• a digital copy containing the Archival Memorandum or Retrieval Memorandum. <p>If the Archival/Reinstitution Memorandum is not approved by the Department, the Course Guide and attachments are returned to the Author for revision.</p>
<p>4. The Registrar reviews the Archival Memorandum or Reinstitution Memorandum for verification of course number, title, credits, prerequisites, contact hours, duration, relation to other curricula, cost to student, and catalog description. When approved, the Registrar signs the Archival Memorandum or Retrieval Memorandum cover sheet and forwards the form to the appropriate Dean.</p> <p>If the Archival/Reinstitution is not approved, the Registrar returns the form to the Department for revision.</p>
<p>5. The Dean reviews the Archival Memorandum or Reinstitution Memorandum for purpose, feasibility, budgetary impact, design, and evaluation. When approved, the Dean signs the Archival or Retrieval Memorandum cover sheet and sends the form to the CEWD Assistant Director.</p> <p>If not approved, the form is returned to the Department for revision.</p>
<p>6. The CEWD Assistant Director reviews the Archival Memorandum or Reinstitution Memorandum for purpose, feasibility, budgetary impact, design, and evaluation. When approved, the CEWD Assistant Director signs the Archival Memorandum cover sheet and sends the form to the office of the Vice President for Academic Affairs (VPAA).</p> <p>If not approved, the form is returned to the Department for revision.</p>
<p>7. The VPAA reviews the Archival Memorandum or Reinstitution Memorandum from the perspective of institutional scope and sequence and makes final approval. If not approved, the form is returned to the Dean/CEWD Assistant Director who coordinates necessary revisions with the Department.</p>

8. **The VPAA's office archives/reinstates the original printed and electronic Course Archival or Retrieval Memorandum** and distributes copies of the approved form to the Registrar, Department, Dean, Associate Deans, and Learning Resources Center.



CEWD FORMS



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

MOA/MOU WORKSHEET

MOU/MOA will be between:

Guam Community College & Name of agency/organization: _____

Effective Start Date: _____

Effective End Date: _____

Reason(s) for MOA:

- Are there any laws/policies in place mandating an MOA?
 - _____
- Is there a particular need for MOA considering current socioeconomic circumstances?
 - _____

Main items to be covered in MOA:

- Please list all course information that will be offered for the special project.
 - Course Alpha/Title: _____
 - Credit, NonCredit, or CEU: _____
 - Number of Credits/CEUs: _____
 - Lab Fee: _____
 - Textbook Fee: _____
 - Registration Fee: _____
 - Additional Clearances (Police, Court, Drug Screening, etc.)
 - Certificate to be awarded: Name: _____ Fee: _____
 - Other: _____
- Is there a certification examination to be taken upon successful course/cohort completion?
 - Name of Certification Exam (e.g., A+ Certification, NREMT, Pro Board, NCLEX, etc.): _____
 - If yes, what is the fee per student? _____
 - Who will pay for the exam fee? _____
- What supplies/materials/equipment are required for the special project? Please list item and price.
 - _____
 - _____
 - _____

- What is the total estimated cost for supplies/materials equipment? _____
- Is agency/organization providing personnel as instructors (e.g., GFD Fire Academy, C&Q Cohort, etc.)? _____Yes _____No
 - Have instructors been certified by HRO? _____
 - Have instructors provided “outside employment” documentation? _____
 - Have instructors provided official memo of approval from Head Official of Agency/Organization indicating no conflict with work schedule?

- Who is responsible for selecting the students/participants for the training?
 - _____
- How many individuals/ will participate in the cohort/training? (Min & Max)
 - Min: _____
 - Max: _____
- Will accommodative services be required? _____Yes _____No
 - If so, include that fee in the breakdown. (The standard rate for ASL services is usually \$20/hour)
 - _____
- What timeframe/schedule will the training follow? (Times and Dates)
 - From _____ to _____
 - Dates: _____
 - Times: _____
- Where will the instruction of classes take place? (please select all applicable)
 - _____GCC
 - _____Off-Campus location: _____
- What date will payment be due? _____
- Provide the required information (Name(s) and Official Title(s)) for signatory block:
 - _____
 - _____
 - _____
 - _____
 - _____
 - _____



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

CE-SPECIFIC - COURSE APPROVAL FORM (CREDIT)

SCHOOL

DEPARTMENT

COURSE ALPHA, NUMBER, TITLE

AUTHOR

DATE SUBMITTED

Check the action to be taken and have the indicated people sign.

- Course Adoption
- Course Substantive Revision

APPROVED BY	NAME	APPROVED	DISAPPROVED	DATE
DEPARTMENT CHAIR		<input type="checkbox"/>	<input type="checkbox"/>	
ASSISTANT DIRECTOR, CONTINUING EDUCATION	Rowena Ellen Perez	<input type="checkbox"/>	<input type="checkbox"/>	
REGISTRAR	Patrick L. Clymer	<input type="checkbox"/>	<input type="checkbox"/>	
DEAN		<input type="checkbox"/>	<input type="checkbox"/>	
VP, ACADEMIC AFFAIRS	R. Ray D. Somera, Ph.D.	<input type="checkbox"/>	<input type="checkbox"/>	

CE-SPECIFIC COURSE APPROVAL FORM FOR ADOPTION AND SUBSTANTIVE REVISION

I. TYPE OF ACTION

Check the type of action that applies. If previous Course Guide exists, please attach.

A. Adoption

B. Substantive Revision (attach Adoption Course Guide)

The numbers listed next to the changes below may or may not require a response and they have been identified as those questions most likely needing to be addressed. The entire Course Guide should be reviewed for applicability.

Change in number of credit hours: II, IVD, VII, VIII, IX, X, XI, XII

Change in prerequisite(s) other than prerequisite(s) offered within your department: II, IVD, VII, VIII, IX, X, XI, XII

Substantive change in course content: II, IVD, VII, VIII, IX, X, XI, XII

Identify specific changes not listed above:

II. INTRODUCTION

The course is connected to the following program(s):

III. COURSE DESCRIPTION & STUDENT LEARNING OUTCOMES

This course description will appear in the College Catalog followed by the Student Learning Outcomes Course Level.

Course Description:

If the description above is a revision, attach a copy of the current catalog page(s) to be revised.

Catalog Year:

Page Numbers:

STUDENT LEARNING OUTCOMES – COURSE LEVEL (LIST 3-5)

Upon successful completion of this course, students will be able to:

1.

IV. RATIONALE FOR PROPOSAL

If this course is connected to a program, answer A, D and E. If this course is not connected to a program, answer A-D.

A. Reason this proposal should be adopted in light of the College's mission statement and educational goals

B. An assessment of Industry or Community need

C. Conformity of this course to legal and other external requirements. Include articulation agreements, State Voc/Tech requirements, accrediting agency standards, State Board regulations, professional certification or licensing requirements if applicable

D. Results of course and course guide evaluation.

- E. Program requirements (associate degree, certificate, diploma) served by this course

V. RESOURCE REQUIREMENTS AND COSTS

- A. Resources (materials, media, and equipment) and costs
- B. Personnel requirements (administrative, instructional and support staff) and costs
- C. Facility requirements and costs
- D. Funding source(s)
- E. Impact, financial or otherwise, this course may have on the School/College

VI. IMPLEMENTATION SCHEDULE

- A. Implementation date
 - * Document must be approved by second week of March to be effective following fall semester or second week of October to be effective following spring semester.
- B. Course Offering:

VII. COURSE DESCRIPTION

- A. Course
 - Alpha:
 - Number:
- B. Course Title(s)
 - Long Title:
 - Abbreviated Title (20 characters maximum):
- C. Contact Hours and Number of Students
 - Maximum Number of Students:
 - Lecture Hours:
 - Lab Hours (state category 1 or 2):
 - Clinical:
 - Other:
 - Total Hours:
- D. Number/Type of Credits
 - Carnegie Units: per semester
 - Semester Hours: per semester
- E. Catalog Description (Moved to Section III. See page 2)
- F. Prerequisite(s)
- G. Co-requisites(s)
- H. Articulation
 - Secondary Programs/Courses
 - University of Guam
 - Others
- I. Target Population
- J. Cost to Students (specify any lab fees)

VIII. COURSE DESIGN

IX. COURSE OUTLINE

X. STUDENT LEARNING OUTCOMES - DETAILED (based on Course Outline)

XI. MEANS OF ASSESSMENT AND CRITERIA FOR SUCCESS

XII. TEXTBOOK REFERENCE, EQUIPMENT AND SUPPLIES

A. Required Textbook(s)

B. Reference(s) and Bibliography

C. Equipment/Facilities

D. Instructional Supplies

E. Has the Advisory Committee reviewed and concurred with the materials, content, and assessment used for this course?

Yes

No

Comments:



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

**CE-SPECIFIC CEU OR NONCREDIT COURSE
APPROVAL / MODIFICATION FORM**

SCHOOL

DEPARTMENT

COURSE ALPHA, NUMBER, TITLE

AUTHOR

DATE SUBMITTED

Check the action to be taken and obtain required signatures for approval.

- Course Adoption: **Comments:**
- Course Non-substantive Revision: **Comments:**
- Course Substantive Revision: **Comments:**

APPROVED BY	NAME	APPROVED	DISAPPROVED	DATE
DEPARTMENT CHAIR		<input type="checkbox"/>	<input type="checkbox"/>	
ASSISTANT DIRECTOR, CONTINUING EDUCATION	Rowena Ellen Perez	<input type="checkbox"/>	<input type="checkbox"/>	
DEAN		<input type="checkbox"/>	<input type="checkbox"/>	
REGISTRAR	Patrick L. Clymer	<input type="checkbox"/>	<input type="checkbox"/>	
VP, ACADEMIC AFFAIRS	R. Ray R. Somera, Ph.D.	<input type="checkbox"/>	<input type="checkbox"/>	

CE-SPECIFIC CEU or NONCREDIT COURSE APPROVAL/ MODIFICATION FORM

I. COURSE ALPHA/TITLE:

II. CONTACT HOURS:

III. ___ CEU(s) Noncredit

IV. COURSE DESCRIPTION & STUDENT LEARNING OUTCOMES

This course description will appear in the College Catalog followed by the Student Learning Outcomes-Course Level.

Course Description:

If the description above is a revision, attach a copy of the current catalog page(s) to be revised.

Catalog Year: Page Numbers:

STUDENT LEARNING OUTCOMES – COURSE LEVEL (LIST 3-5)

Upon successful completion of this course, students will be able to:

SLO 1:

SLO 2:

SLO 3:

V. STUDENT LEARNING OUTCOMES – DETAILED (BASED ON COURSE OUTLINE)

VI. TEXTBOOK REFERENCE, EQUIPMENT AND SUPPLIES

- A. Required Textbook(s):
- B. Reference(s) and Bibliography:
- C. Equipment/Facilities:
- D. Instructional Supplies:



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

COURSE/EVENT PERMISSION FORM (FOR CEWD USE ONLY)

Control #: _____

<input type="checkbox"/> COURSE PERMISSION FORM To be used for all instructional offerings outside of the regular semester schedule for credit (Undergraduate & Graduate), noncredit, or CEUs.	<input type="checkbox"/> EVENT PERMISSION FORM To be used for incentive or non-incentive activities such as a special event (e.g., testing, workshop, training, conference, etc.) or course offered through federal grants.
--	---

Requested by: _____ Contact Number: _____ Email: _____
Term: _____ Part of Term: _____ CRN/Section: _____ DETAIL CODE: _____ Date Requested: _____
<input type="checkbox"/> _____ Credit (Undergraduate <input type="checkbox"/> /Graduate <input type="checkbox"/> <input type="checkbox"/> _____ CEUs <input type="checkbox"/> Noncredit
Course No: _____ Course/Event Title: _____ Syllabus Attached: <input type="checkbox"/>
Class Days: _____ Time: _____ Total Contact Hours: _____ Class Size: Max. _____ Minimum: _____

Instructor: _____ Start Date: _____ End Date: _____
Instructor Contact Number: _____ Email: _____
Classroom Number: _____

Cost of Instruction
 Part of Full Time Faculty Load | Cost to be paid by: NAF or Adjunct FOAPAL – Total with benefits: \$ _____
 Instructor Cleared: **HR** Yes No **Nurse** Yes No Comments: _____

Cost to Student
 Course Fee: \$ _____ Lab Fee: \$ _____ Total Cost to Student: \$ _____
FOAPAL: _____ **Accountant's Initials** _____

Comments: _____

The following documents are needed for review and approval: Complete budget, MOA/MOU, faculty workload, syllabus with SLOs identified, and any additional documents to support this course. The signatures below acknowledge that the College reviewed and approves the offering and the instructor is qualified and is in good standing.

_____	Date
Program Manager/CEWD Coordinator	
_____	Date
CEWD Assistant Director	
_____	Date
Registrar	

_____	Date
Dean, TPS/TSS (faculty workload certification)	
_____	Date
Vice President for Academic Affairs	
_____	Date
Office of Human Resources (contract preparation)	

After the approval process is completed, please return forms to CEWD for filing.



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

DEPARTMENT COURSE/EVENT PERMISSION FORM

Control #: _____

<input type="checkbox"/> COURSE PERMISSION FORM To be used for all instructional offerings outside of the regular semester schedule for credit (Undergraduate & Graduate), noncredit, or CEUs.	<input type="checkbox"/> EVENT PERMISSION FORM To be used for incentive or non-incentive activities such as a special event (e.g., testing, workshop, training, conference, etc.) or course offered through federal grants.
--	---

Department: _____ Requested by: _____ Contact Number: _____ Course Guide Approved: __Yes __ No

Term: _____ Part of Term: _____ CRN/Section: _____ DETAIL CODE: _____ Date Requested: _____

_____ Credit (Undergraduate/Graduate) _____ CEUs Noncredit

Course No: _____ Course/Event Title: _____ Syllabus Attached:

Class Days: _____ Time: _____ Total Contact Hours: _____ Class Size: Max. _____ Minimum _____

Instructor: _____ Start Date: _____ End Date: _____ Classroom Number: _____

Instructor Contact Number: _____ Email: _____

Cost of Instruction

Part of Full Time Faculty Load | Cost to be paid by: NAF or Adjunct FOAPAL – Total with benefits: \$ _____
Instructor Cleared: **HR** Yes No | **Nurse** Yes No Comments: _____

Cost to Student

Course Fee: \$ _____ Lab Fee: \$ _____ Total Cost to Student: \$ _____

FOAPAL: _____ **Accountant's Initials** _____

Comments: _____

The following documents are needed for review and approval: Complete budget, MOA/MOU, faculty workload, syllabus with SLOs identified, and any additional documents to support this course/event. The signatures below acknowledge that the College reviewed and approves the offering and the instructor is qualified and is in good standing.

Dept. Chairperson (Course Requestor) Date

Dept. Chairperson (Course Oversight) Date

Program Manager Date

Dean of TPS Date

Dean of TSS Date

CEWD Assistant Director Date

Vice President for Academic Affairs Date

Registrar Date

Office of Human Resources (contract preparation) Date

After the approval process is completed, please return forms to CEWD for filing.



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
COURSE/EVENT AMENDMENT FORM

Control #: _____

CPF **EPF** **Original CPF/EPF Attached**

Department: _____ Requested by: _____ Contact Number: _____ Date Requested: _____
Term: _____ Part of Term: _____ CRN: _____ Section: _____ DETAIL CODE: _____
Course No: _____ Course/Event Title: _____
Class Days: _____ Time: _____
Total Contact Hours: _____ Class Size: Max. _____ Minimum _____
Start Date: _____ End Date: _____
Instructor: _____ Contact Number: _____ Email: _____

Cost of Instruction

Part of Full Time Faculty Load | Cost to be paid by: NAF or Adjunct FOAPAL – Total with benefits: \$ _____
 Instructor Cleared: **HR** Yes No | **Nurse** Yes No Comments: _____ **FOAP:** _____

Cost to Student

Course Fee: \$ _____ Lab Fee: \$ _____ Total Cost to Student: \$ _____

FOAPAL: _____ **Accountant's Initials** _____

Justification: <i>*Please indicate changes*</i> _____ FROM: _____ TO: _____
--

Changes Acknowledged by: *(Change of Time, Date or Location of the course/event requires ONLY the CEWD Assistant Director's signature)*

Name/Department	Initial	Date
Dept. Chairperson (Course Requestor)		
Dept. Chairperson (Course Oversight)		
Program Manager/CEWD Coordinator		
Dean of TPS		
Dean of TSS		
CEWD Assistant Director		
Vice President for Academic Affairs		
Registrar		

After the approval process is completed, please return forms to CEWD office for filing.



**CONTINUING EDUCATION & WORKFORCE DEVELOPMENT
SPECIAL PROJECT/GRANT BUDGET FORM**

Control #: _____

Division: Office of VP for Academic Affairs Department: _____
 Program Department Chair/Manager: _____ Date: _____ **REVISION**

Project Course Alpha/Title & Description: _____

ESTIMATED REVENUES

Total Revenue: _____ FOAPAL Number: _____
BILLING INSTRUCTIONS:
 Is the revenue amount to be billed? Yes No
 If yes, who will initiate billing? _____ Bill Attn. To: _____
 If no, please indicate how funds will be received: _____

TERM: _____ **PART OF TERM:** _____ **CRN:** _____ **SECTION:** _____ **DETAIL CODE:** _____

ESTIMATED EXPENSES

OBJECT CLASSIFICATION	CREDIT	OTHER	FOAPAL
Personnel Services			
P/T Salaries (Indicate Hourly Rate x Total Hours)			
F/T Salaries			
Benefits (35% of Total Salaries)			
Total Salaries and Benefits			
Total Travel/Transportation			
Total Contractual Services			
Total Supplies/Materials			
Total Equipment (IT)			
Total Miscellaneous (e.g. Tuition, Fees, Cert. Exam)			
Total Utilities			
Total Capital Outlay			
Indirect Cost Recovery (FC = 25% Other = 40%)			
GRAND TOTAL			

Justification: _____

Submitted by _____ Reviewed by CEWD Assistant Director _____

Vice President for Finance & Administration: _____



GUAM COMMUNITY COLLEGE

Syllabus

Course:

Day/Date/Time:

Instructor:

Office Hours:

Office Address:

Telephone:

E-mail:

Course Description

This course is

Student Learning Outcomes (SLOs):

Upon successful completion of this course, students will be able to:

- 1.
- 2.
- 3.

Required Reading

Course Activities

Course Requirements

Grading Criteria:	Grading Scale:

Emergency & Evacuation Procedures

In case of any emergency, please contact Student Support Services Office at 735-5555/6/8 or call 688-1758 or 788-2223. **For life threatening emergency, please call 911, and then call Student Support Services Office.** During the phone call, please identify yourself, identify your location (room and building number), and describe the emergency. Student Support Services Office personnel will be at the emergency site immediately. The emergency contact numbers are located at the entrance/exit of each classroom.

If an emergency arises which requires evacuation, it is extremely important that you follow your instructor's directions for evacuating the building, including where to congregate. Although an evacuation plan is posted near the door of each classroom, circumstances could change the posted routes. A fire alarm or bell will be utilized to initiate an evacuation. If there is no electricity, a gong will sound three (3) times. Once the reason for evacuation is resolved, the school bell will ring eight (8) times to signal everyone to return to their assigned buildings. For more information, you may find the GCC Evacuation Procedure on the GCC website at www.guamcc.edu.

For any power or water outage on campus, students will be informed via the media (radio stations) and the Pacific Daily News (PDN) Mobile Alert. Make-up classes will be arranged by the instructor when classes resume.

The instructor reserves the right to make changes as necessary to this syllabus. If changes are necessary, the instructor will immediately notify the students of such changes both by email and announcement. If you need additional assistance, please inform your instructor as soon as possible.

In an effort to keep all GCC constituents current on campus happenings, students are encouraged to sign up for the PDN Mobile Alert System. Instructions to register are posted on MyGCC Campus Announcements or you may log on to www.guampdn.com/SMS, fill out the necessary information, scroll to the Guam Community College section and select emergency alerts and updates.

Accommodative Services

The Office of Accommodative Services provides assistance to individuals with disabilities seeking educational opportunities with Guam Community College. GCC in compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA), encourages students with a documented disability, and who wish to receive instructional accommodations, to meet with the Office of Accommodative Services to secure accommodations. Our office is committed to ensuring that students with disabilities are afforded an equal opportunity to access the educational programs and services that GCC has to offer, and to providing reasonable accommodations, adequate to the needs of an individual's disability within a classroom setting, while maintaining the level of academic standards required in all courses and programs at Guam Community College. The office is located in the Student Services and Administration Building, Room 2139. The office telephone number is (671) 735-5597 and email is john.payne2@guamcc.edu.

FERPA Statement

Under the Family Educational Rights and Privacy Act (FERPA), your educational records are confidential and protected. Under most circumstances, your records will not be released without your written consent. However, some directory information may be released to third parties without your prior consent unless a written request to restrict this is on file. You can learn more about student rights to privacy at the GCC online college catalog in Appendix I (<http://catalog.guamcc.edu>), by visiting the U.S. Department of Education website (<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>), or accessing the FERPA Group on MyGCC which is open to all users. If you still have concerns, please email the Registrar's Office at gcc.registrar@guamcc.edu.

Academic Integrity

Academic integrity is fundamental to learning and is consistent with the Institutional Learning Outcomes (ILOs) espoused at Guam Community College. The concept of academic integrity lies at the very heart of any college, and learning and scholarship cannot thrive without this fundamental value. Therefore, academic dishonesty cannot be tolerated. Students who commit such acts expose themselves to sanctions as severe as expulsion from the College. Academic dishonesty can take different forms, including, but not limited to cheating, plagiarism, and technology misuse and abuse. In any situation in which a student is unsure of what constitutes academic dishonesty, it is the student's responsibility to raise the question with the instructor. It is also the student's responsibility to be familiar with the student guidelines on academic integrity. Additional information and definitions may be found on pages 12 and 13 of the Student Handbook.

Student Handbook

All students registered in CEWD courses are required to abide by all applicable rules and policies set forth in the current Guam Community College Student Handbook which is readily available for review through the Guam Community College website.

Computer Use Disclaimer

The Guam Community College provides students with access to various technological tools to help them successfully achieve their educational goals. Although the college takes steps to ensure these tools are accessible and operational, it is the student's responsibility to safeguard and back-up working files at all times.

The instructor reserves the right to make changes as necessary to this syllabus. If changes are necessary, the instructor will immediately notify the students of such changes both by email and announcement. If you need additional assistance, please inform your instructor as soon as possible.



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

Control #:

ADJUNCT FACULTY COMMITMENT FORM

Instructor Information:

Instructor Name: _____ Contact Number: _____ Email: _____ Banner Number: _____
--

Course Information:

Course No: _____ Course/Event Title: _____
Class Days: _____ Time: _____ Contact Hours: _____ Prep Hours: _____ Total Hours: _____
Start Date: _____ End Date: _____
<input type="checkbox"/> _____ Credit (Undergraduate <input type="checkbox"/> /Graduate <input type="checkbox"/>) <input type="checkbox"/> _____ CEUs <input type="checkbox"/> Noncredit
Term: _____ Part of Term: _____ CRN/Section: _____ DETAIL CODE: _____

CEWD Pay Rates

CEU/Noncredit courses:	\$25.00/hr.
Credit Courses:	Adjunct faculty pay rate per HRO

Under-Enrolled Credit Courses:

Please indicate your willingness to teach at a reduced rate if the course enrollment is below thirteen (13) students.

12 - 10 students: 75% of pay rate	Circle one: YES / NO	Initials: _____
9 - 7 students: 50% of pay rate	Circle one: YES / NO	Initials: _____
6 students or less: flat rate of \$500.00 rate	Circle one: YES / NO	Initials: _____

TB Clearance:

Faculty member has met the TB Requirement. Nurse/HR Initials: _____ Date: _____

Assignment Acceptance:

I have read and understood the information above.
 I am aware of my responsibilities as an Adjunct Faculty Member at GCC.
 I accept the assignment as listed above.
 I understand that under-enrolled CEU/Noncredit courses may be postponed or rescheduled.

 Instructor's Signature

 Date

Approval:

 Department Chair's Signature

 Date

 Dean's Signature

 Date



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

ADJUNCT FACULTY CLEARANCE FORM

CEWD requires adjunct faculty to complete a clearance form at the end of each course before paychecks are distributed. Clearance includes submitting grades, returning keys and audio visual & multimedia equipment, library books, videos, laserdiscs and DVD's, etc. Please obtain clearance and submit the completed form to the Department Chair.

Instructor's Name: _____ Course No(s): _____ Mailing Address: _____ _____ Phone No(s): _____	_____ TERM _____ CRN _____ Department
--	---

Department Chairperson	Initial if Cleared	Date
All Teacher's Edition/Manual and/or other Instructional Materials provided through the Department Chairperson		
Textbook and Equipment Inventory		
Keys - Desks/ Cabinets/ Classroom		
Attendance Sheets		
Grade Report(s): Inputted By: <input type="checkbox"/> CEWD <input type="checkbox"/> Admissions & Registration <input type="checkbox"/> MyGCC/Dept.		
Evaluation Form		
Evaluation Report by Department Chair		


****NOTE** Clearance form must be submitted to CEWD in order for faculty to receive paycheck.**

Instructor's Signature

Date

CEWD Received By:	Date:
-------------------	-------

CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

	Last Name, First Name, Middle Initial:	Preferred First Name (Nick Name):	SS#:
	Home Address:		
Mailing Address:		Date of Birth (Day, Month, Year):	
Home Telephone:	Cell or Pager:	Personal Email Address:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorce <input type="checkbox"/> Domestic Partner	Disability: Y/N	Citizenship:

ETHNIC ORIGIN

<p>Please check one:</p> <p><input type="checkbox"/> Nonresident Alien (A)</p> <p><input type="checkbox"/> Race and Ethnicity unknown (B)</p> <p><input type="checkbox"/> Hispanic/Latino (C)</p> <p><input type="checkbox"/> American Indian or Alaska Native(D)</p> <p><input type="checkbox"/> Asian (E)</p> <p><input type="checkbox"/> Black or African American (F)</p> <p><input type="checkbox"/> Native Hawaiian or Other Pacific Islander (G)</p> <p><input type="checkbox"/> White (H)</p> <p><input type="checkbox"/> Two or more races (I)</p>	<p>If you selected Asian, please check box that apply:</p> <p><input type="checkbox"/> Burmese</p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Filipino</p> <p><input type="checkbox"/> Asian Indian</p> <p><input type="checkbox"/> Japanese</p> <p><input type="checkbox"/> Korean</p> <p><input type="checkbox"/> Thai</p> <p><input type="checkbox"/> Vietnamese</p> <p>If not listed:</p>	<p>If you selected Native Hawaiian or Other Pacific Islander, please check box that apply:</p> <p><input type="checkbox"/> Chamorro</p> <p><input type="checkbox"/> Chuukese</p> <p><input type="checkbox"/> Kosraean</p> <p><input type="checkbox"/> Marshallese</p> <p><input type="checkbox"/> Micronesian</p> <p><input type="checkbox"/> Ponapean</p> <p><input type="checkbox"/> Yapese</p> <p>If not listed:</p>
--	---	--

EMERGENCY CONTACT

Last Name, First Name, Middle Initial	Relationship	Telephone or Cell Phone Number
1		
2		
3		

TRAINER OF RECORD FOR NONCREDIT COURSE(S)*

Please check one: Lead Trainer Co-Trainer

FOREIGN LANGUAGE FLUENCY

Please indicate if you are fluent in any language other than English.

Spoken: _____ Written: _____ Signing: _____

PROFESSIONAL LICENSE/CERTIFICATION

License & Cert Number	Licensing Authority & Website Addresses	Effective & Expiration Date(s)	Effective & Expiration Date(s)

FORMAL EDUCATION INFORMATION

Diploma/Degree	Major & Minor	Graduation Date	School Name & Address

Please attach professional resume or curriculum vitae (CV)

I certify that the above information is correct and true. I understand that I am required to officially inform the GCC Continuing Education & Workforce Development (CEWD) of any changes that need to be made to this record. I understand that I may be required to provide official documents as requested by the CEWD to support my Trainer of Record for Noncredit Course verification on file. (e.g. name change, college transcripts, professional certifications, etc.).

Trainer Signature

Date

Trainer Credentials Verified by:

Print Name/Title _____ Signature: _____
Date _____

Organization/Agency/Department: _____

Approved Disapproved

Signature: _____

*Compensation for the project is funds which are unencumbered through GCC.
CONTINUING EDUCATION & WORKFORCE DEVELOPMENT



EVALUATION FORM

Course Alpha/Title: _____

Course Date: _____

Course SLO: _____

Please indicate your impressions of the items listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The training met my expectations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I will be able to apply the knowledge learned.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The content was organized and easy to follow.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The materials distributed were pertinent and useful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The trainer was knowledgeable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. The quality of instruction was good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Class participation and interaction were encouraged.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Adequate time was provided for questions and discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. How do you rate the training overall?	Excellent <input type="radio"/>	Good <input type="radio"/>	Average <input type="radio"/>	Poor <input type="radio"/>	Very poor <input type="radio"/>
10. What aspects of the training could be improved?					
11. Other comments?					

THANK YOU FOR YOUR PARTICIPATION!



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

STUDENT/TRAINEE WAIVER FORM

I, **(please print name here)** _____, acknowledge that
(Course Number & Title) _____ is designated for the purpose of
professional development, and as such, regular student fees will not be assessed. I further acknowledge
that this course may not now or ever be used toward a degree or certificate at Guam Community College.

ACKNOWLEDGED BY:

Print Name

Signature

Job Title

Student ID #:

Date:



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

STUDENT CEU REQUEST FORM

The **Continuing Education Unit (CEU)** is a nationally recognized measure of participation in an approved noncredit continuing education program. One Continuing Education Unit (1.0) is defined as *“ten (10) contact hours of participation in an organized continuing education experience under responsible sponsorship, capable direction, and qualified instruction.”*

The program in which you are participating has been approved for CEU’s based upon 0.1 unit for each contact hour of instruction. For the approved units to be awarded, complete and turn in the CEU registration form below. This action will cause a permanent record to be established in your name and identification number. This record will be maintained under the auspices of the Continuing Education & Workforce Development Office. Should you ever require a copy of CEUs earned in approved programs at the Guam Community College, please make your request in writing. You should include your name, identification number, program title and date of attendance (if possible) in your request. Submit the written request to: **Guam Community College, Continuing Education & Workforce Development Office, P.O. Box 23069, Barrigada, Guam 96921.** If a question should arise in the future, write to this address or call **(671) 735-5574.**

CEU RECORDING FEE: \$20.00

Continuing Education Unit Registration Form

PLEASE PRINT – COMPLETE ALL INFORMATION

Course Title:	Course Dates:
Print Name:	Signature:
Business Address:	Telephone:
Home Address:	Telephone:
OFFICE USE ONLY	
CEU Recording Fee Paid: _____	Detail Code: <u>RCEU</u> CEU(s) Earned _____
Date Received:	Cashier’s Initial:



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

COURSE ARCHIVAL MEMORANDUM

DATE:

TO:	VPAA	Approved: _____	Date: _____
VIA:	CEWD Asst. Dir.	Approved: _____	Date: _____
	Dean	Approved: _____	Date: _____
	Registrar	Approved: _____	Date: _____
	Dept. Chair	Approved: _____	Date: _____

FROM:

SUBJECT: Request Archival of Curriculum

COURSE ARCHIVAL IN ALPHA ____ **NUMBER** ____ **TITLE** _____

Attach course guide

- ____ 1. Justification for course archival
- ____ 2. Plans and implementation date for phasing out this course
- ____ 3. Plans for students currently enrolled in the course or enrolled in the program requiring the course

PROGRAM ARCHIVAL _____

Attach program form

- ____ 1. Justification for program archival
- ____ 2. Plans and implementation date for phasing out this program
- ____ 3. Plans for students currently enrolled in the program



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

REINSTITUTION OF ARCHIVED CURRICULA MEMORANDUM

DATE:

TO:	VPAA	Approved: _____	Date: _____
VIA:	CEWD Asst. Dir.	Approved: _____	Date: _____
	Dean	Approved: _____	Date: _____
	Registrar	Approved: _____	Date: _____
	Dept. Chair	Approved: _____	Date: _____

FROM:

SUBJECT: Request Archival of Curriculum

COURSE REINSTITUTION IN ALPHA _____ NUMBER _____ TITLE _____

Attach course guide

- _____ 1. Justification for course reinstatement
- _____ 2. Plans and implementation dates for updating course guide (if older than five years)

PROGRAM REINSTITUTION _____

Attach program form

- _____ 1. Justification for program reinstatement
- _____ 2. Plans and implementation date for updating program guide (if older than five years)



CONTINUING EDUCATION & WORKFORCE DEVELOPMENT

VERIFICATION CHECKLIST FOR CPF/EPF

Course/Event Title: _____

Term: _____ CRN: _____ Control #: _____

- ATTACHMENTS:
 - MOA/MOU
 - Syllabus/Flyer/Agenda
 - Evaluation Form (with Course SLOs)
 - Trainer of Record
 - Budget Form
 - Adjunct Faculty Clearance Form
 - Adjunct Faculty Clearance Form
- Faculty Workload Form Received (if applicable)
- All Signatures Completed
- Sent to Business for Account FOAPs
- Sent to HR for Payroll
- Course Created in Banner
- Student Charges Assessed
- Personal Information Forms Received
- Registration Forms Received
- CEU Registration Forms Received (if applicable)
- Registration & Deferment (if applicable) Completed
- CEU Recording Fee Listing to Business Office (if applicable)
- Grades Inputted into Banner
- Evaluation (Assessment) Report Received
- Certificates Completed and delivered to: Dept. (signed for) Students (signed for)
- Adjunct Faculty Clearance Form Completed & Received
- Adjunct Paycheck Picked-up/signed for

Other (specify): _____



**ADMINISTRATIVE
DIRECTIVES**



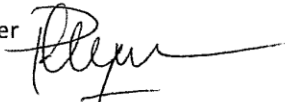
Interoffice Memorandum

Admissions & Registration

December 2, 2011

TO: Dr. R. Ray D. Somera
Vice President for Academic Affairs

FR: Patrick Clymer
Registrar



RE: Definition of a student

After researching and discussing the definition of a student (with input from Dr. Clare Camacho, Carmen Kwek Santos, Victor Rodgers, and Cecilia Delos Santos), the verbiage that was agreed upon is as follows:

Student Definition

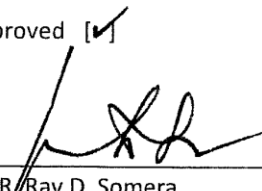
A student is defined as a person enrolled in a combination of courses and related activities organized by the college for the sole purpose of attaining broad educational objectives applicable towards a diploma, certificate, degree, or other formal award.

Persons not seeking a formal award may be enrolled in courses arranged for them exclusively and are not applicable towards educational objectives as defined above. These persons are considered training participants and are not subject to the same requirements for students.

We submit this proposed definition for your review and approval.

Approved

Disapproved



Dr. R. Ray D. Somera
Vice President for Academic Affairs


12-6-2011

Date



Kulehon Kumunidát Guðhan

VP of Business and Finance

To: Departments
From: Carmen K. Santos, CPA, VP Finance & Administration 
Date: 8/27/2012
Re: "For Credit" courses movement

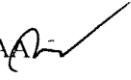
Effective Fall 2012, the College implemented the institutional initiative to move "for credit" courses out of CE and into the regular semester. There have been numerous discussions with the VP's, Deans, and Departments affected by this change.

"For credit" courses are undergraduate level courses that are included in the College catalog and will be counted toward a degree or certificate. Courses previously offered through CE that fall under this category include but are not limited to culinary, electronics, criminal justice and education courses.

For those departments that continue to offer the "for credit" courses through a cohort, grant, MOU/MOA or other agreement through CE, the following procedures will apply.

1. Courses must be registered in the regular term, or the special projects part of term in the regular semester.
2. CE Budgets must include the expense for tuition, student fees, and course fees.
 - a. Adjunct faculty for these courses will be paid through the adjunct pay FOAP. Therefore there is no need to include the faculty and benefits under the CE budget.
 - b. An incentive of 25% will be included (10% CE and 15% Department). The 15% incentive for administration will not be charged.
 - c. If a course fee is charged, there should not be supply expense included on the budget.
3. Once students have been registered, the total tuition, course fee, and student fees will show up as a balance against their account. The Department must submit a memo to Accounts Receivable listing the student names, course number and course title, and total amount to bill the CE course. No additional fees should be assessed as in the past using the Schedule Detail table in Banner.

TO: Dr. Mary Okada, President

VIA: Dr. R. Ray Somera, VPA 

FROM: Reilly Ridgell, Dean TPS

SUBJECT: For Credit but not for Degree courses

DATE: June 29, 2012

I am hereby requesting the creation of courses which are for credit but can not now or ever be used toward a degree or certificate. These courses will be for the purpose of re-certification (of teachers, for example) or to meet requirements for courses needed for employment at GCC. However they can be taken by anyone. These courses will be run through Continuing Education (CE).

Such courses will have the alpha designation of PD, for Professional Development, regardless of department. Numeric designations could mirror existing courses or be completely new depending on whether the numeric is already in use for these types of courses in another department.

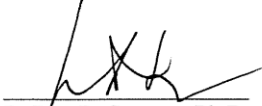
These courses will be taught over a span of time not to exceed a 30 day period, ^{may} for up to ~~twelve teaching days total~~. Courses not consistent with these requirements will be considered for credit courses subject to regular tuition and fees.

Individuals taking these PD courses will not be assessed student fees and will not be allowed to access any student services related to these fees.

Individuals taking these courses will sign an acknowledgement that the courses may not now or ever be used toward a degree or certificate.

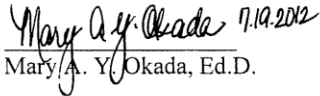
Upon approval of this document,

- 1) Departments will remove from the catalog current courses that will become PD.
- 2) Departments will provide a list of courses to become PD to the Registrar and the Assistant Director of Continuing Education.
- 3) Departments will then write and submit the course guides to turn these regular courses into PD courses (or create new PD courses) through the CE-only course guide process which would include SLOs. The PD courses should not be the same in curriculum and SLOs as those in the regular semester for credit courses. (i.e. One course in CE cannot be the same in content, curriculum, and SLOs as a regular semester course. but have a different course number.)
- 4) Once approved, the courses will be listed in Banner and can be scheduled. All PD courses will be listed in the CE catalog.


R. Ray D. Somera, Ph.D.

recommend

not recommend

 7.19.2012
Mary A. Y. Okada, Ed.D.

approve

disapprove

2015-0013

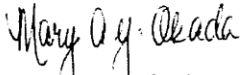
MEMORANDUM

TO: All Employees
FROM: President
SUBJECT: Administrative Directive No. 94-003 Updated
Additional Teaching Load

This directive is intended to ensure that a faculty member or any other college employee continues to maintain an acceptable quality of performance in their primary job while concurrently engaged in adjunct or other additional teaching duties. I offer the following elaboration to enable program managers and administrators to apply this directive effectively.

In general, this directive limits individuals to 135 instructional contact hours in a regular (Fall or Spring) semester. The 135 instructional hour limit will apply to courses or classes which fall within the academic semester schedule or equivalent time period. Contact hours are hours an instructor teaches regular semester courses as well as courses in community/continuing education, adult education, and special training projects, most of which are short-term. The 135 instructional contact hour calculation can include any combination of semester-length and short-term courses that total not more than 135 hours.

This directive applies to any additional teaching load conducted on off-duty hours during the regular duty days, in the evenings and on Saturdays, but exempts school holidays and summer vacation.


Mary A.Y. Okada, Ed.D.
President




Sm 11/14/13
RECEIVED


GUAM COMMUNITY COLLEGE
(671) 735-5574

MEMORANDUM

Date: November 12, 2013

To: All Departments

Via: Dr. Ray Somera, Vice President, Academic Affairs 
Dr. Virginia Tudela, Dean, TSS 
Dr. Juan Flores, Dean, TPS 

From: Victor Rodgers, Assistant Director, CEWD 

Subject: Assessment and Reporting of Credit, CEU, and Non-credit Courses Offered By
Departments through CEWD

In order to improve, the ACCJC Evaluation Team recommends that the College develop a process for systematically evaluating CEU or non-credit courses, workshops, and training sessions for content and effectiveness, in alignment with the assessment process that is in place for credit courses, (II.A.2).

In response to the above ACCJC Evaluation Team recommendation, the CEU or non-credit courses initiated by departments and are (or will be) listed in the electronically or printed CEWD catalog, shall be assessed by the initiating department and incorporated into their Group D department courses assessment unit. Monitoring of assessment of these courses by the departments will be an integral part of the assessment process, thereby, integrating the systematic evaluation of the department's activity for credit, CEU, and non-credit course offerings in alignment with the ACCJC recommendation. For your information, CEWD has developed an assessment tool for CEU or non-credit courses which your department may utilize as part of the department assessment plan.

Effective Spring 2014, the responsible department would select at least one of the Student Learning Outcomes (SLOs) to be assessed and input the results into TracDat using the following steps:

1. Department originating the CPF/EPF must include an assessment plan and assessment tool in approval packet;
2. Department must submit and input roster/grades and sign-in/attendance sheets up to 5 working days of course completion. Should certificates need to be created by CEWD submission of supporting documents (roster/grades/sign-in or attendance sheets) must be within 1-3 days.
3. Department must submit completed assessment tools/data analysis/report to CEWD up to fifteen (15) working days of course completion.
4. Department inputs relative assessment tool/data analysis/report of CEU or non-credit course into TracDat in accordance with their Group D department courses assessment unit activity.

March 20, 2014

MEMORANDUM

TO: College Community

FROM: Dr. R. Ray D. Somera
Vice President for Academic Affairs

SUBJECT: Awarding of CEUs

The Office of Continuing Education and Workforce Development (CE/WD) is now in the process of applying for accreditation with the International Association of Continuing Education and Training (IACET) in order to professionalize its standing as a CEU-granting unit of the college. As a result, a new process of awarding CEUs has been developed by the CE Office in preparation for an accreditation visit later in the academic year.

Effective immediately, all students taking classes or workshops coursed through CE must file a CEU application form that will allow CE to have a written, permanent record or evidence of CEUs granted by the college. A template has been created for this purpose. CE will coordinate this new requirement with individual concerned departments.

This will also be in keeping with ACCJC's recommendation to formalize the assessment of all CE courses and training, similar to the process we employ with credit-bearing courses. The new process of awarding CEUs will help us facilitate this linkage between assessment and evidence.

Please be guided accordingly.

Continuing Education & Workforce Development

Tel. (671) 735-5574

Fax: (671) 734-5238

Email: learning4life@guamcc.edu

www.guamcc.edu

