

**CURRICULUM CHANGE REQUEST**  
*(ORIGINATOR COMPLETE BLOCKS 1 THROUGH 8 ONLY)*

<b>1. Originator's Name:</b>	<b>2. Course Name:</b>	<b>3. Request Date:</b>
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**4. Type of Change:**

<input type="checkbox"/> <b>MINOR CHANGE</b> A change to correct editorial and typographical errors, teachability or safety.	<input type="checkbox"/> <b>TECHNICAL CHANGE</b> Any change to tactical or training-unique equipment or documentation originating in the program that affects curriculum. A technical change may or may not affect individual lesson objectives, but DOES NOT affect terminal performance objectives, course length, or resources.	<input type="checkbox"/> <b>MAJOR CHANGE</b> A major change to any course terminal performance objective (new EPQ, new policy, etc), an increase in course length, or any change that requires additional resources.
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**5. Instructional Materials Affected** (Check all that are known to be affected):

<input type="checkbox"/> CURRICULUM OUTLINE	<input type="checkbox"/> JOB AID	<input type="checkbox"/> PERFORMANCE TEST
<input type="checkbox"/> STUDENT GUIDE	<input type="checkbox"/> INSTRUCTOR GUIDE	<input type="checkbox"/> POWERPOINT
<input type="checkbox"/> OTHER (SPECIFY) _____		

**6. Describe what functionality or curriculum and lesson that this CR addresses:**

**7. Define problem or the need for this change:** (Only one per change request. Attach additional sheets if necessary)

**8. Suggestion, Improvement or Recommendation:** (Only one per change request. Attach additional sheets if necessary)

**9. School Chief Approval**     YES     NO

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Title: \_\_\_\_\_

**Routed to Curriculum Development Branch for consideration during Prioritization Process**

**10. Prioritization Process Outcome**

ISD Resource Assigned     Priority, but no resource currently available     No resources, will work with School to address

Signature: \_\_\_\_\_