



**APPLICATION FOR APPROVAL**  
**CLOCK HOUR/CREDIT HOUR CONVERSION**

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This application must be typed; hand-written applications will not be accepted.

**PLEASE ALLOW 60 DAYS FOR APPROVAL OF A COMPLETE APPLICATION\***  
(\* All required documentation provided)  
(\$250 Application Fee per Program)

<b>INSTITUTION</b>	
<b>STREET ADDRESS</b>	
<b>CITY, STATE, ZIP CODE</b>	
<b>CHIEF ADMINISTRATOR</b>	
<b>TELEPHONE NUMBER EXTENSION NUMBER</b>	
<b>EMAIL ADDRESS</b>	
<b>NAME OF PROGRAM</b>	
<b>PROJECTED DATE OF IMPLEMENTATION</b>	
<b>DATE OF NEXT ACCREDITATION VISIT</b>	

**SUBMIT ONE HARD COPY OF THIS APPLICATION TO:**

**Council on Occupational Education  
Attention: Marcia Cox  
7840 Roswell Road  
Building 300, Suite 325  
Atlanta, GA 30350**

**AND**

**EMAIL ONE PDF COPY TO: [marcia.cox@council.org](mailto:marcia.cox@council.org)**

*(June 2019)*

**INSTRUCTIONS:** Complete one Clock Hour/Credit Hour Chart for each converted program (copy chart as needed). Be sure that all supporting documentation is attached. This application is reviewed and approved by the Commission. One program per application.

**DEFINITIONS:**

**Program** - A combination of courses and related activities (e.g. laboratory activities and/or work-based activities) that leads to a credential and is offered by an institution to develop competencies required for a specific occupation.

**Course** – A series of lectures, laboratory, and/or work-based activities that pertain to a particular subject and that are typically required as a part of a broader curriculum (a program, for example).

**Clock / Credit Hour Ratios** - A credit hour is equivalent to a minimum of each of the following: one semester credit for 15 clock hours of lecture, 30 clock hours of laboratory, or 45 clock hours of work-based activities; or one quarter credit for 10 clock hours of lecture, 20 clock hours of laboratory, or 30 clock hours of work-based activities.

**Work-Based Activities** - Structured learning activities conducted in supervised work settings external to the institution or a program, or in a setting that involves the public (for example: clients who are served by the institution in cosmetology clinical or automotive technology settings) that are components of educational programs (e.g., externships, internships, clinical experiences, industrial cooperative education, and similar activities). Work-based activities may also include structured learning activities that occur outside the classroom. These activities must be planned with at least two objectives:

- 1) To provide students with the opportunity to develop and apply a 'real-world' work experience using the knowledge and skills they attained in their program of study; and
- 2) To provide the institution with objective input from potential employers or customers of program graduates.

1.	Identify each campus where this program is offered:
2.	Submit copies of state approvals for this conversion for EACH campus.
3.	Submit copies of revised publications or drafts documenting this revision in these publications.
4.	Complete the attached Clock Hour/Credit Hour Chart for the program being converted.
5.	Make the \$250.00 check payable to the Council on Occupational Education.

**This application will not be processed until the fee has been received.**

**APPLICATION CERTIFICATION AND DISCLOSURE STATEMENT**

I certify that all appropriate documentation has been enclosed with this completed application and that all information contained in the application is correct.

\_\_\_\_\_  
*Signature of Chief Administrator*

\_\_\_\_\_  
*Date*

## CLOCK HOUR/CREDIT HOUR CHART

<b>Program Name</b>		<b>CIP Code</b>	
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**Instructions:** Refer to the latest edition of the *Handbook of Accreditation* for definitions. For a New Program Application, this form is to be completed for programs measured in credit hours *and* those measured in clock hours. LIST ALL COURSES OFFERED WITHIN THE PROGRAM. Make additional copies of this page as needed.

**Provide total program length in all categories that apply (be sure these numbers agree with the grand totals):**

<b>TOTAL REQUIRED CLOCK HOURS:</b>		<b>SEMESTER CREDIT HOURS:</b>		<b>QUARTER CREDIT HOURS:</b>	
<u>Total number of clock hours available via distance education</u>		<u>Total number of semester hours available via distance education</u>		<u>Total number of quarter hours available via distance education</u>	

<b>COURSE NAME</b> (Use one line for EACH COURSE within the program.)	<b>LECTURE</b> Place an 'x' in the far right column if any course instruction is available via distance education delivery.			<b>LABORATORY</b> Place an 'x' in the far right column if any course instruction is available via distance education delivery.			<b>WORK-BASED ACTIVITIES</b> Place an 'x' in the far right column if any course instruction is available via distance education delivery.			<b>Course Totals</b>	
	Clock Hours	Credit Hours	DE	Clock Hours	Credit Hours	DE	Clock Hours	Credit Hours	DE	Clock	Credit
<b>TOTAL ALL COLUMNS</b>											

The Grand Total number of credit hours will be rounded down in accordance with the latest edition of the *Policies and Rules of the Commission.* GRAND TOTALS