

Information Completed by:

Date:

New/Revised Curriculum Control Process Form - Side Two

Curriculum Project Results:

Title of the Curriculum (Instructional Resource):

Grade Levels:

Course Objectives (or where located):

Did the new curriculum meet the specification criteria defined?

Comments:

Information Completed by:

Date:

Describe the action taken to **verify** and **validate** that the curriculum developed met the specification results:

Verification:

Validation:

Information Completed by:

Date:

Final Project Status Check - Discuss the current status, ensure all information is complete, identify and needs for changes and ensure proper personnel are involved.

Personnel involved in this review:

Results of the Status Check:

Information Completed by:

Date:

Final Approval(s):

Name:

Signature:

Date:

Name:

Signature:

Date:

Name:

Signature:

Date:

Name:

Signature:

Date:

Name:

Signature:

Date:

Name:

Signature:

Date:

Name:

Signature:

Date:

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