Thank you for your interest in the Curriculum Refresh Collaborative. Please answer the following questions to complete your application. Only one application is required for each team. Applications will close on **October 17th, 2022**.

On which of these areas of curriculum development will your proposal focus?

- Revising learning outcomes and aligning course materials/assignments with outcomes
- Integrating an evidence-based pedagogy
- Designing innovative assessments

Which of the following evidence-based pedagogies would you be integrating into the curriculum (if applicable)?

- Inclusive teaching
- Experiential Learning
- Well-being
- Active learning
- Problem-based learning
- Competency-based learning
What course or course series will your team work to refresh (e.g., BUAD 200; Biology 150 and 160)?

How many people will be on your team?

- 3
- 4
- 5

First Team Member

Please provide the following information for your first team member. This person will be designated as the point person for your team.

First Name

Last Name

Email (UT email, such as NetID@utk.edu, NetID@vols.utk.edu, or NetID@tennessee.edu)

What is the faculty role of the first team member?

- Tenure Track Faculty
- Non-Tenure Track Faculty

What will the first team member's role in the course be (e.g., teacher, supervisor)?

- Teacher
- Supervisor
- Other

(Optional) Does the first team member have any other administrative titles or responsibilities (e.g. department head, director, etc.)? If so, please share them below.
Second Team Member

Please provide the following information for your second team member.

First Name
Last Name
Email (UT email, such as NetID@utk.edu, NetID@vols.utk.edu, or NetID@tennessee.edu)

What is the faculty role of the second team member?
- Tenure Track Faculty
- Non-Tenure Track Faculty

What will the second team member's role in the course be (e.g., teacher, supervisor)?
- Teacher
- Supervisor
- Other

(Optional) Does the second team member have any other administrative titles or responsibilities (e.g. department head, director, etc.)? If so, please share them below.

Third Team Member

Please provide the following information for your third team member.

First Name
Last Name
Email (UT email, such as NetID@utk.edu, NetID@vols.utk.edu, or NetID@tennessee.edu)
What is the faculty role of the third team member?

- Tenure Track Faculty
- Non-Tenure Track Faculty

What will the third team member's role in the course be (e.g., teacher, supervisor)?

- Teacher
- Supervisor
- Other [ ]

(Optional) Does the third team member have any other administrative titles or responsibilities (e.g. department head, director, etc.)? If so, please share them below.

[ ]

Fourth Team Member (if applicable)

Please provide the following information for your fourth team member (if applicable).

- First Name
- Last Name
- Email (UT email, such as NetID@utk.edu, NetID@vols.utk.edu, or NetID@tennessee.edu)

What is the faculty role of the fourth team member (if applicable)?

- Tenure Track Faculty
- Non-Tenure Track Faculty

What will the fourth team member's role in the course be (e.g., teacher, supervisor) (if applicable)?

- Teacher
- Supervisor
(Optional) Does the fourth team member have any other administrative titles or responsibilities (e.g. department head, director, etc.)? If so, please share them below (if applicable).

Fifth Team Member (if applicable)

Please provide the following information for your fifth team member (if applicable).

First Name

Last Name

Email (UT email, such as NetID@utk.edu, NetID@vols.utk.edu, or NetID@tennessee.edu)

What is the faculty role of the fifth team member (if applicable)?

- Tenure Track Faculty
- Non-Tenure Track Faculty

What will the fifth team member’s role in the course be (e.g., teacher, supervisor) (if applicable)?

- Teacher
- Supervisor
- Other

(Optional) Does the fifth team member have any other administrative titles or responsibilities (e.g. department head, director, etc.)? If so, please share them below (if applicable).
Confirmation

By checking the box below, the applicants named above confirm that they are aware that each applicant's department head will have to approve their participation in this project. TLI will reach out to department heads once projects have been provisionally accepted, but we highly recommend that faculty speak with their department head before submitting their application.

☐ Confirmed

Proposal

Impact

In which semester will the new curriculum be implemented?

☐ Spring 2023
☐ Fall 2023
☐ Spring 2024

In the box below, please estimate the maximum number of students that could enroll in this course or course series during the first year of implementation.

☐ Fewer than 5
☐ 5 - 100
☐ 100 - 499
☐ 100 - 499
☐ More than 500

(Optional) If additional instructors will teach this course, how do you plan to train or support them to integrate the refreshed curriculum?
Efficacy

In approximately 4-5 sentences, please explain what aspect(s) of the course or course series your curriculum refresh will aim to improve and how the approach you hope to use in the Collaborative will address this area.

Innovation

In approximately 4-5 sentences, please explain what you feel is innovative about your approach and why you feel it will have a substantial impact on the curriculum.

Assessment

In approximately 4-5 sentence, please share any ideas you have for assessing this project. How will you know if this project is successful?
Open Response

(Optional) If your project is accepted, what kind of help do you imagine your group might need from TLI staff? Your answer to this question will not play any role in the evaluation of your proposal but will help TLI staff prepare for the Collaborative.