COURSE OUTLINE
Palo Verde College
One College Drive, Blythe, CA 92225
(760) 921-5500

Palo Verde College

1. **Course Information. Course Initiator: Vicki Attaway**

Subject Area and Course Number: **NBE 093**		Course Title: **Presentation Software Workshop**		
New Course ☐ Revised ☐ Updated ☒	Static ID **C09300**		TOP Code **0704.00**	Credit Status Request **Noncredit**
Classification Code **C=Adult and Secondary Basic Education**	SAM Code **D=Possibly occupational**			Course prior to college level **Y=Not applicable**
Noncredit category **I=Short-term vocational**		Meets a unique need: Yes ☒ No ☐	Course duplicated: Yes ☐ No ☒	Demand/Enrollment Potential: Yes ☒ No ☐
Transfer request **C=Non-transferable**		Articulation request: UC ☐ CSU ☐ CSU-GE ☐ IGETC ☐ CAN ☐		

2. **Some or all aspects of this course may be delivered in a Distance Education mode: Yes ☐ No ☒**
   If checked yes, all questions pertaining to Distance Education must be answered.

3. **This course has laboratory or clinic/field hours: Yes ☒ No ☐**
   If checked yes, this outline must include a list of laboratory or clinic/field activities or topics.

4. **This course has prerequisites, co-requisites, or advisories: Yes ☐ No ☒**
   If checked yes, please complete a Prerequisite Justification Form .

5. **Curriculum Committee Approval Date: 11/10/04**

6. **After Curriculum Committee approval, the following is to be completed by the Office of Instruction:**

TRANSFER APPROVAL STATUS	ARTICULATION APPROVAL STATUS				
Approval Pending		**Not Requested**	**Date of Submission**	**Approval Pending**	**Approval Denied**	**Date Approved**
	UC	☐		☐	☐	
	CSU	☐		☐	☐	
	CSU-GE	☐		☐	☐	
	IGETC	☐		☐	☐	
	CAN	☐		☐	☐	

CATALOG DESCRIPTION:

This course will cover the basic techniques in computer presentation graphics software. Students will learn to create a slide presentation utilizing popular software to enhance oral reports. This course is repeatable.

UNITS:

FACE TO FACE: **Hours Per Week: Lecture: 9   Laboratory: 9 Clinic/Field:**

DISTANCE EDUCATION:

ENTRY LEVEL SKILLS, PRE-REQUISITES, CO-REQUISITES AND ADVISORIES:

None

Upon successful completion of the course the student will be able to:

1. Demonstrate the basics of presentation software.
2. Create and use slide presentations.
3. Summarize data and emphasize report highlights.
4. Combine text, drawings, charts, outlines, graphics, video and/or audio clips with slide presentations.

COURSE OUTLINE AND SCOPE:

1. Outline of Topics or Content:

Creating presentations
Summarizing data
Emphasizing Report Highlights
Adding Text, graphics, charts, outlines, drawings and video/audio materials to slide presentations

2. If a course contains laboratory or clinic/field hours, list activities or topics:

Creating presentations
Summarizing data
Emphasizing Report Highlights
Adding Text, graphics, charts, outlines, drawings and video/audio materials to slide presentations

3. Examples of Reading Assignments:

Instructor prepared and/or commercial materials.

4. Examples of Writing Assignments:

Creating slide shows

5. Appropriate Assignments to be completed outside of class:

<u>6. Appropriate Assignments that demonstrate critical thinking:</u>

Creating presentation graphics to focus on one subject

<u>7. Other Assignments:</u>

As determined by instructor.

<u>8. Indicate any assignments that are unique to the Distance Education mode of delivery:</u>

none

<u>METHOD OF EVALUATION—FACE TO FACE:</u>

Student will be awarded credit/no credit dependent upon completion of slide presentations.

<u>METHOD OF EVALUATION—DISTANCE EDUCATION:</u>

N/A

<u>METHOD OF INSTRUCTION—FACE TO FACE:</u>

Lecture, demonstration

<u>METHOD OF INSTRUCTION—DISTANCE EDUCATION:</u>

N/A

<u>REPRESENTATIVE TEXTBOOKS, AND OTHER READING AND STUDY MATERIALS</u>:
This section shall include author(s), title, and current publication date of all representative materials.

Instructor prepared and/or commercial materials.

<u>SIGNATURES:</u>

COURSE INITIATOR: _____ **DATE:** _____

LIBRARY: _____ **DATE:** _____

CHAIR OF CURRICULUM COMMITTEE: _____ **DATE:** _____

SUPERINTENDENT/PRESIDENT: _____ **DATE:** _____