IAI GECC PHYSICAI	L/LIFE SCIENCE	LAB SUBM	IISSION .	FORM					
Institution:		Course Number:		Course Title:					
Credit Hours (if applying for a lab-only course; semester/ quarter):		Total contact hour per semester/quarter:		If applicable, list any Co-requisite Course:					
Lab Textbook/ Manual				quired Materials:					
If stand-alone course, indicate <u>number of sections</u> being taught using each mode of delivery:									
Face-to-Face	Hybrid	On-	line	Other (specify)			
Activity Title:	Description of lab:		S	tudent Outcome (including lab skills):	Methodology of Lab Activity*	Minutes of each activity			

IAI GECC PHYSICAL/LIFE SCIENCE LAB SUBMISSION FORM								
Institution:		Course Number:		Course Title:				
Activity Title:	Description of lab:		Stu	dent Outcome (including lab skills):	Methodology of Lab Activity*	Minutes of each activity		

IAI GECC PHYSICAL/LIFE SCIENCE LAB SUBMISSION FORM								
Institution:		Course Number:		Course Title:				
Activity Title:	Description of lab:		Stu	dent Outcome (including lab skills):	Methodology of Lab Activity*	Minutes of each activity		