



Form A

Academic Affairs - Course Proposal

CALIFORNIA STATE UNIVERSITY, SACRAMENTO

Academic Unit: College of Health and Human Services		Department Chair: Marilyn Hopkins, Dean	
Type of Course Proposal: New__ Change__ Deletion <u>X</u>		Date: July 17, 2006	
Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No <u>X</u>		For Catalog Copy: Yes <u>X</u> No ___	CCE: Yes ___ No ___
		Semester Effective: Fall <u>X</u> Spring <u>X</u> 2007 ___	
Prefix &No. HHS 195	Title: Field Study in HHS	Units: 2 -3 units	

Change to:		
Prefix &No.	Title:	Units:

JUSTIFICATION:

Course is no longer being offered.

NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy.)

See <http://www.csus.edu/acaf/univmanual/crspsl.htm> - Guidelines for Catalog Course Description

Note:	
Prerequisite:	
Corequisite:	
CAN (California Articulation Number):	
Graded: Letter ___ Credit/No Credit ___	Instructor Approval? Yes ___ No ___
Course Classification:	Title for SIS+ (not more than 25 characters)
Cross Listed? Yes ___ No <u>X</u>	If yes, with what course:
How Many Times Can This Course be Taken for Credit?	

FOR NEW COURSE PROPOSALS OR SUBSTANTIVE CHANGES ONLY:

Description of the Expected Learning Outcomes: Describe outcomes using the following format: "Students will be able to: 1), 2), etc." See the example at <http://www.csus.edu/acaf/example.htm>

**Attach a list of the required/recommended course readings and activities [Note: it is understood that these are updated and modified as needed by the instructor(s).] This attachment should be forwarded only to your Dean's office, not Academic Affairs.

Assessment Strategies: A description of the assessment strategies (e.g., portfolios, examinations, performances, pre- and post-tests, conferences with students, student papers) which will be used by the instructor to determine the extent to which students have achieved the learning outcomes noted above:

For whom is this course being developed?

Majors in the Dept___ Majors of other Depts___ Minors in the Dept___ General Education___ Other___

Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes___ No___

If yes, identify program(s):

Does the proposed change or addition cause a significant increase in the use of College or University resources (lab room, computer facilities, faculty, etc.)? Yes___ No___

If yes, attach a description of resources needed and verify that resources are available.

Indicate which department or programs will be affected by the proposed course (if any). _____

The Department Chair's signature below indicates that affected programs have been sent a copy of this proposal form.

Approvals: If proposed change, new course or deletion is approved, sign and date below. If not approved, forward without signing to the next reviewing authority, and attach an explanatory memorandum to the original copy.

Signatures:

Date

Department Chair:	
College Dean or Associate Dean:	
CPSP (for school personnel courses ONLY)	
Associate Vice President and Dean for Academic Programs	

Distribution: Academic Affairs (original), Department Chair and College Dean. Dean's office to send original after approval to Jerri McAtee, at zip 6016. An electronic copy must also be sent to mcateejj@csus.edu.