



SACRAMENTO
STATE

Course Change Proposal Form A



Academic Group (<i>College</i>): Education	Academic Organization (<i>Department</i>): Teacher Education	Date: Sept. 1, 2007
Type of Course Proposal: New ___ Change <u>x</u> Deletion ___	Department Chair: Dr. Robert Pritchard	Submitted by: Dr. Rita M. Johnson
Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No <u>xx</u>	For Catalog Copy: Yes <u>xx</u> No ___ CCE (<i>Extension</i>): Yes ___ No ___	Semester Effective: Fall <u>xx</u> Spring ___, 2008

This course replaces experimental course Subject Area (*prefix*) and Catalog Nbr (*course number*):

Change from:

Subject Area (<i>prefix</i>) & Catalog Nbr (<i>course no.</i>): EDTE 290	Title: Seminar in Culminating Experience	Units: 3
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Change to:

Subject Area (<i>prefix</i>) & Catalog Nbr (<i>course no.</i>):	Title:	Units:
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JUSTIFICATION:

Changes to reflect new needs of the EDTE Masters' Programs which utilize this course.

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)

Seminar in Culminating Experience. Seminar to focus on topics/elements/expectations to be included in the culminating experience: abstract writing, development of organizational schemes for the review of literature; format requirements; thesis/project planning; range and breadth of evidence for a comprehensive review; integrating the review with thesis/project; writing style and quality; revisions and critical feedback. **Successful completion of the course requires the completion of Chapters 1 and 2 of the thesis/project and the beginning of Chapter 3.**

Note:

Prerequisite: **Approval of Culminating Experience Proposal or Instructor Permission**
Enforced at Registration: Yes ___ No xx

Corequisite:
Enforced at Registration: Yes ___ No ___

CAN (California Articulation Number):

Graded: Letter ___ xx ___ Credit/No Credit ___ Instructor Approval Required? Yes ___ No xx ___

Course Classification (<i>e.g., lecture, lab, seminar, discussion</i>): Seminar	Title for CMS (not more than 30 characters) Sem For Culminating Exper.
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Cross Listed? Yes ___ No <u>xx</u> ___	If yes, do they meet together and fulfill the same requirement, and what is the other course.
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How Many Times Can This Course be Taken for Credit? 1 ___

Can the course be taken for Credit more than once during the same term? Yes ___ No x ___

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:

Students will be graded (credit or no credit) based on completion of the indicated competencies.

For whom is this course being developed?

Majors in the Dept xx 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 xx No

If yes, identify program(s): Masters' Degree for Curriculum and Instruction, Gender Equity, and Language and Literacy

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 xx

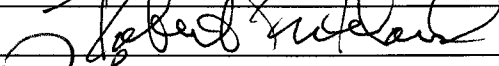
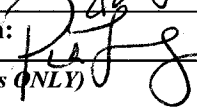
If yes, attach a description of resources needed and verify that resources are available.

Indicate which department or programs will be affected by the proposed course (if any). none

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: 	9/20/07
College Dean or Associate Dean: 	9/20/07
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 Academic Affairs, at mail zip 6016. An electronic copy must also be sent.