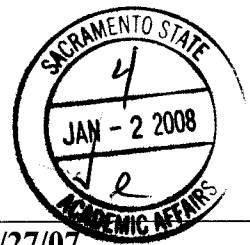




SACRAMENTO  
STATE

# Course Change Proposal Form A



|  |   |  |
|--|---|--|
| <b>Academic Group (College):</b><br><b>Education</b>   | <b>Academic Organization (Department):</b><br><b>EDS</b>  | <b>Date:</b> 11/27/07  |
| <b>Type of Course Proposal:</b><br>New ___ Change <input checked="" type="checkbox"/> Deletion ___   | <b>Department Chair:</b><br><b>Bernice Bass de Martinez</b>   | <b>Submitted by:</b><br><b>Rachael Gonzales</b>  |
| <b>Does this course fulfill a requirement for single-subject or multiple subject credential students?</b> Yes <input checked="" type="checkbox"/> No ___ | <b>For Catalog Copy:</b> Yes <input checked="" type="checkbox"/> No ___<br><b>CCE:</b> Yes ___ No <input checked="" type="checkbox"/> | <b>Semester Effective:</b><br>Fall <input checked="" type="checkbox"/> 2008 Spring ___ |

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

**Change from:**

|  |  |                    |
|--|--|--------------------|
| <b>Subject Area (prefix) &amp; Catalog No. (course no.):</b><br>EDS 120B | <b>Title:</b> <i>The Management of Teaching and Learning</i> | <b>Units:</b><br>1 |
|--|--|--------------------|

**Change to:**

|  |   |               |
|--|---|---------------|
| <b>Subject Area (prefix) &amp; Catalog No. (course no.):</b> | <b>Title:</b> <i>Positive Behavior Support for Students with Mild, Moderate, Severe Behavioral Challenges(Mild/Moderate Credential) - Lab</i> | <b>Units:</b> |
|--|---|---------------|

**JUSTIFICATION:**

Course title and description change better reflects content of the 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)**

**Comprehensive study and application of intervention strategies that enhance the quality of life for students with mild/moderate disabilities. Students will learn (a) how to design learning environments that prevent and reduce problem behaviors, (b) learn how to identify and assess problem behavior using functional behavioral assessment methods, (c) learn how to design and implement positive behavioral support interventions which are in compliance with federal IDEA law, and (d) apply behavioral procedures on a systemic, school wide basis.**

**Note:**

|   |  |
|---|--|
| <b>Prerequisite: Admittance into Mild/Moderate Credential</b>   |  |
| <b>Enforced at Registration:</b> Yes ___ No <input checked="" type="checkbox"/>   |  |
| <b>Corequisite:</b>   |  |
| <b>Enforced at Registration:</b> Yes ___ No <input checked="" type="checkbox"/>   |  |
| <b>CAN (California Articulation Number):</b>  |  |
| <b>Graded:</b> Letter <input checked="" type="checkbox"/> Credit/No Credit ___  | <b>Instructor Approval Required?</b> Yes ___ No <input checked="" type="checkbox"/>                  |
| <b>Course Classification (e.g., lecture, lab, seminar, discussion):</b><br>Lab- S-48  | <b>Title for CMS (not more than 30 characters):</b><br>PBS (mild/moderate credential) - lab          |
| <b>Cross Listed?</b><br>Yes ___ No <input checked="" type="checkbox"/>  | <b>If yes, do they meet together and fulfill the same requirement, and what is the other course.</b> |
| <b>How Many Times Can This Course be Taken for Credit?</b> <u>once</u>  |  |
| <b>Can the course be taken for Credit more than once during the same term?</b> Yes ___ No <input checked="" type="checkbox"/> |  |

**FOR NEW COURSE PROPOSALS OR SUBSTANTIVE CHANGES ONLY:**

EDS 120 *Positive Behavior Support for Students with Mild, Moderate, Severe Behavioral Challenges(Mild/Moderate Credential) - lab* page 2

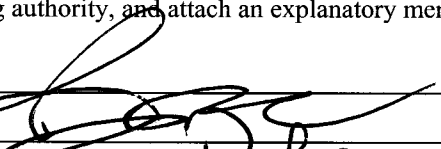
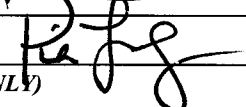
**Description of the Expected Learning Outcomes:** Describe outcomes using the following format: "Students will be able to: 1), 2), etc." See the example at <http://www.csus.edu/acaf/example.htm>

\*\*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 <input checked="" type="checkbox"/> Majors of other Depts <input type="checkbox"/> Minors in the Dept <input type="checkbox"/> General Education <input type="checkbox"/> Other <input type="checkbox"/>         |  |
| Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>   |  |
| If yes, identify program(s): <b>Education Specialist Credential: Mild/Moderate Disabilities; and Mild/Moderate plus Multiple Subject Credentials</b>  |  |
| 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 <input type="checkbox"/> No <input checked="" type="checkbox"/> |  |
| 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). _____   |  |
| <i>The Department Chair's signature below indicates that affected programs have been sent a copy of this proposal form.</i>   |  |

**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:                 | 12-20-07 |
| College Dean or Associate Dean:  | 12/21/07 |
| 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.