



SACRAMENTO  
STATE

# Course Change Proposal Form A



<b>Academic Group (College):</b> <b>College of Education</b>	<b>Academic Organization (Department):</b> <b>Child Development</b>	<b>Date:</b> <b>February 26, 2009</b>
<b>Type of Course Proposal:</b> New ___ Change <u>X</u> Deletion ___	<b>Department Chair:</b> <b>Karen Davis O'Hara</b>	<b>Submitted by:</b> <b>Karen Davis O'Hara</b>
<b>Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No <u>X</u></b>	<b>For Catalog Copy: Yes <u>X</u> No ___</b> <b>CCE (Extension): Yes ___ No <u>X</u></b>	<b>Semester Effective:</b> <b>Fall <u>X</u> Spring ___, 2009__</b>

<b>This course replaces experimental course Subject Area (prefix) and Catalog Nbr (course number):</b>	
<b>If changing an existing course, should new version be considered a repeat of the original version? If so, the same Course ID will be maintained. If not, a new Course ID will be assigned. Note: In PeopleSoft terminology, the Course ID is the unique system identifier, not the Catalog Nbr.</b>	<b>Yes <u>X</u> No ___</b>

**Change from:**

<b>Subject Area (prefix) &amp; Catalog Nbr (course no.):</b> <b>CHDV 137L</b>	<b>Title:</b> <b>Cognitive Development Research Laboratory</b>	<b>Units:</b> <b>1</b>
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**Change to:**

<b>Subject Area (prefix) &amp; Catalog Nbr (course no.):</b> <b>CHDV 137L</b>	<b>Title:</b> <b>Cognitive Development Research Laboratory</b>	<b>Units:</b> <b>1</b>
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**JUSTIFICATION:**

**Because of the large writing requirement in this course, the CHDV department has decided that students should be required to complete CHDV 133 prior to taking CHDV 137. This necessitates removing the possibility of 133 being offered as a co-requisite.**

**There is one change to this course:**

- a) Make CHDV 133 a pre-requisite (not to be taken concurrently).**

**NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy. See <http://www.csus.edu/umannual/acad.htm> - Guidelines for Catalog Course Description)**

Laboratory course to complement CHDV 137. Emphasis placed on the observation, interaction, documentation, and using a scientific approach to learn about cognitive development. Classroom, field, and research experiences supporting the study of cognitive development.

**Note: Must co-enroll in the corresponding section of CHDV 137.**

**Prerequisite: CHDV 30 or 35 and CHDV 133**

**Enforced at Registration: Yes X No \_\_\_**

**Corequisite: CHDV 137**

**Enforced at Registration: Yes X No \_\_\_**

**Graded: Letter X Credit/No Credit \_\_\_**

**Instructor Approval Required? Yes \_\_\_ No X**

**Course Classification (e.g., lecture, lab, seminar, discussion):**  
**16 Lab**

**Title for CMS (not more than 30 characters)**  
**Cognitive Dev Research Lab**

**Cross Listed?**  
**Yes \_\_\_ No X**

**If yes, do they meet together and fulfill the same requirement, and what is the other course.**

**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>

No Change

\*\*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:

No change

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): Child Development, Child Development minor, Counseling Minor (currently under review)

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.


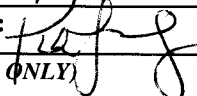
Indicate which department or programs will be affected by the proposed course (if any). Liberal Studies

*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: 	3/27/09
College Dean or Associate Dean: 	3/30/09
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.