



SACRAMENTO
STATE

Course Change Proposal Form A



Academic Group (College): Education	Academic Organization (Department): Bilingual and Multicultural Education	Date: March 18, 2009
Type of Course Proposal: New ___ Change ___ Deletion <u>XX</u>	Department Chair: Dr. Sue Heredia	Submitted by: Dr. Margarita Berta-Avila
Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes <u>XX</u> No ___	For Catalog Copy: Yes <u>XX</u> No ___ CCE (Extension): Yes ___ No ___	Semester Effective: Fall <u>XX</u> Spring ___, 2009

This course replaces experimental course Subject Area (prefix) and Catalog Nbr (course number):	
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.	Yes ___ No <u>XX</u>

Change from:

Subject Area (prefix) & Catalog Nbr (course no.): EDBM 345A	Title: EDBM 345A: Curriculum and Instruction in (Secondary History/Social Science) for Multilingual And Multicultural Secondary Classrooms	Units: 2
--	---	--------------------------

Change to:

Subject Area (prefix) & Catalog Nbr (course no.):	Title:	Units:
--	---------------	---------------

JUSTIFICATION:

To more efficiently meet the California Commission of Teaching Credentialing (CCTC) mandates for teacher education preparation; the enrollment mandates by College of Education Dean's office; and the Bilingual and Multicultural Education Department's (BMED) workload distribution, BMED's Preliminary Single Subjects Credential with English Language Arts Authorization (ELA)'s content-specific methods courses are being deleted from the program. A new course, EDBM 344, has been modified and will replace this course.

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)

Note:	
Prerequisite: Enforced at Registration: Yes ___ No ___	
Corequisite: Enforced at Registration: Yes ___ No ___	
Graded: Letter ___ Credit/No Credit ___	Instructor Approval Required? Yes ___ No ___
Course Classification (e.g., lecture, lab, seminar, discussion): C04; S48	Title for CMS (not more than 30 characters)
Cross Listed? Yes ___ No ___	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? ___	
Can the course be taken for Credit more than once during the same term? Yes ___ No ___	

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>

Students will be able to:

**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:

.

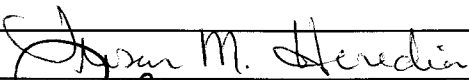

For whom is this course being developed?
 Majors in the Dept ____ Majors of other Depts ____ Minors in the Dept ____ General Education ____ Other ____
 Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes ____ No ____
 If yes, identify program(s): Bilingual and Multicultural Education Department
 Preliminary Single Subjects Credential with English Language Arts Authorization (ELA)

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). _____

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: 	4-21-09
College Dean or Associate Dean: 	4/23/09
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.