



SACRAMENTO  
STATE

# Course Change Proposal Form A



<b>Academic Group (College): Health &amp; Human Services</b>	<b>Academic Organization (Department): Recreation, Parks &amp; Tourism Administration</b>	<b>Date: 04-15-09</b>
<b>Type of Course Proposal:</b> New ___ Change <u>X</u> Deletion ___	<b>Department Chair: Dana Kivel</b>	<b>Submitted by: Dana Kivel and Greg Shaw</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>No</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> RPTA 183	<b>Title: Marketing Recreation Services</b>	<b>Units: 03</b>
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**Change to:**

<b>Subject Area (prefix) &amp; Catalog Nbr (course no.):</b>	<b>Title:</b>	<b>Units:</b>
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**JUSTIFICATION:**

In the past, MKTG 101 has been listed as a prerequisite for RPTA 183. This prerequisite has never been enforced and often confuses students who try to go to the College of Business to take MKTG 101.

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

Fields of recreation (including therapeutic, commercial, municipal, etc.), tourism and hospitality, while diverse, all offer products that are primarily intangible. The management and marketing of such service products can differ profoundly from those of goods products (often the focus of traditional business programs). Addresses the nature of the service product and services marketing in the people intensive, experiential world of recreation. **Units: 3.0.**

**Note:**

**Prerequisite:**  
**Enforced at Registration: Yes No X**

**Corequisite:**  
**Enforced at Registration: Yes No X**

**Graded: Letter X Credit/No Credit \_\_\_**      **Instructor Approval Required? Yes \_\_\_ No X**

**Course Classification (e.g., lecture, lab, seminar, discussion): same**      **Title for CMS (not more than 30 characters): Marketing Recreation Services**

**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>

**Course Goals/Learning Outcomes**  
- same -

**\*\*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.**

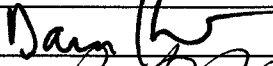
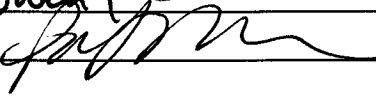
**Assessment Strategies:** A description of the assessment strategies (e.g., portfolios, examinations, performances, pre-and post-tests, conferences with students, student papers) which will be used by the instructor to determine the extent to which students have achieved the learning outcomes noted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

- same -

**For whom is this course being developed?**  
Majors in the Dept  X  Majors of other Depts  X  Minors in the Dept  X  General Education      Other       
Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes      No  X   
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  X   
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: 	4/23/09
College Dean or Associate Dean: 	4/24/09
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.