# Course Change Proposal

## Form A

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>SSIS</th>
<th>Academic Organization (Department):</th>
<th>Anthropology</th>
<th>Date: May 17, 2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Course Proposal:</td>
<td></td>
<td>Department Chair:</td>
<td>Dr. David Zeanah</td>
<td>Submitted by:</td>
</tr>
<tr>
<td>New ___ Change X ___ Deletion ___</td>
<td></td>
<td></td>
<td></td>
<td>Cindi SturtzSreetharan</td>
</tr>
<tr>
<td>Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No X ___</td>
<td>For Catalog Copy: Yes X No ___</td>
<td>CCE: Yes ___ No X ___</td>
<td>Semester Effective: Fall X Spring, 2008</td>
<td></td>
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</table>

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

**This Catalog Number (course number) is being replaced:**

### Change from:

| Subject Area (prefix) & Catalog No. (course no.): | ANTH 195D | Title: Fieldwork in Linguistic Anthropology | Units: 3 |

### Change to:

| Subject Area (prefix) & Catalog No. (course no.): | ANTH 169 | Title: Research Methods in Linguistic Anthropology | Units: 3 |

## JUSTIFICATION:

This course is being renamed to better fit the content of the course. Renumbering is occurring in order to delineate this new title from the other Fieldwork courses in our Department.

### 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)

### Note:

**Prerequisite:** 160 OR 162, or instructor permission

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

**Corequisite:**

**Enforced at Registration:** Yes No ___

**CAN (California Articulation Number):**

**Graded:** Letter X ___ Credit/No Credit ___

**Instructor Approval Required:** Yes ___ No ___

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

**Seminar**

**Title for SIS+/CMS (not more than 30 characters):**

**Research Methods in Ling Anth**

**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 _1_
**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](http://www.csus.edu/acaf/example.htm)

**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:

**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.

**For whom is this course being developed?**
- Majors in the Dept. X
- 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 X No

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 X 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):

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The Department Chair's signature below indicates that affected programs have been sent a copy of this proposal form.

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**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.

<table>
<thead>
<tr>
<th>Signatures:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Department Chair:</td>
<td>9/28/07</td>
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</tbody>
</table>

College Dean or Associate Dean:

CPSP (for school personnel courses ONLY)

Associate Vice President and Dean for Academic Programs:

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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.