Course Change Proposal
Form A

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Arts &amp; Letters</th>
<th>Academic Organization (Department): Communication Studies</th>
<th>Date: 12-11-08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Course Proposal:</td>
<td></td>
<td>Department Chair: Nick Burnett</td>
<td>Submitted by: Maggie Fuchs</td>
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<tr>
<td>New ____ Change X Deletion ____</td>
<td></td>
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<tr>
<td>Does this course fulfill a requirement for single-subject or multiple subject credential students?</td>
<td>Yes ____ No X</td>
<td>For Catalog Copy: Yes X No</td>
<td>Semester Effective: Fall X Spring __, 2009</td>
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<td>CCE (Extension):</td>
<td>Yes ____ No X</td>
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This course replaces experimental course Subject Area (prefix) and Catalog Nbr (course number):

<table>
<thead>
<tr>
<th>Change from:</th>
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<tbody>
<tr>
<td>Subject Area (prefix) &amp; Catalog Nbr (course no.):</td>
<td>COMS 27A</td>
<td></td>
</tr>
<tr>
<td>Title:</td>
<td>Digital Film/Video Production</td>
<td></td>
</tr>
<tr>
<td>Units:</td>
<td>2</td>
<td></td>
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JUSTIFICATION:

We are cross-listing this course with FILM 27A.

NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy. See http://www.csus.edu/aca/univmanual/crsps.html - Guidelines for Catalog Course Description)

No change in description.

Note:

Prerequisite:
Enforced at Registration: Yes ____ No ____
Corequisite: COMS 27B or FILM 27B
Enforced at Registration: Yes X No ____

CAN (California Articulation Number):

Graded: Letter X Credit/No Credit ____
Instructor Approval Required? Yes ____ No X

Course Classification (e.g., lecture, lab, seminar, discussion):
lecture C - 2
Title for CMS (not more than 30 characters)
Digital Film/Video Production

Cross Listed?
Yes X No ____
If yes, do they meet together and fulfill the same requirement, and what is the other course.
ComS 27A and Film 27A meet together and fulfill the same requirement.

How Many Times Can This Course be Taken for Credit? once

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

☐ 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.

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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):

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). ____________________________

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: ____________________________ Date: 12/12/08

College Dean or Associate Dean: ____________________________ Date: 1/8/09

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.