**Course Change Proposal**

**Form A**

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Academic Organization (Department):</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>College of Education</td>
<td>Special Ed, Rehab, School Psych</td>
<td>March 2, 2009</td>
</tr>
<tr>
<td>College of Continuing</td>
<td>&amp; Deaf Studies</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Course Proposal:</th>
<th>Department Chair:</th>
<th>Submitted by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>New ___ Change X ___ Deletion ___</td>
<td>Bernice Bass de Martinez</td>
<td>JoAnn Aguirre, Jill Matsueda</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Does this course fulfill a requirement for single-subject or multiple subject credential students?</th>
<th>For Catalog Copy:</th>
<th>Semester Effective:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ___ No X ___</td>
<td>Yes ___ No ___</td>
<td>Fall X ___ Spring __, 2009</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CCE (Extension):</th>
<th></th>
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<tbody>
<tr>
<td>Yes ___ No ___</td>
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</table>

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

<table>
<thead>
<tr>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ___ No X ___</td>
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</tbody>
</table>

**Change from:**

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog Nbr (course no.):</th>
<th>Title: Instructional Supervision/Coordination I of Vocational/Technical/Applied Academics Education</th>
<th>Units: 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDS 106</td>
<td></td>
<td></td>
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</table>

**Change to:**

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog Nbr (course no.):</th>
<th>Title: Instructional Supervision/Coordination I of Career Technical Education</th>
<th>Units:</th>
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**JUSTIFICATION:**

The proposed changes to the degree title of Bachelor of Career and Technical Studies (BCTS) and course titles will better align with the goals set forth by the State Plan for Career Technical Education. No changes made to course description.

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

<table>
<thead>
<tr>
<th>Note:</th>
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<tbody>
<tr>
<td>Prerequisite: None</td>
</tr>
<tr>
<td>Enforced at Registration: Yes ___ No ___</td>
</tr>
<tr>
<td>Corequisite: None</td>
</tr>
<tr>
<td>Enforced at Registration: Yes ___ No ___</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Graded: Letter X ___ Credit/No Credit ___</th>
<th>Instructor Approval Required? Yes ___ No X ___</th>
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<table>
<thead>
<tr>
<th>Course Classification (e.g., lecture, lab, seminar, discussion): 02 – Lecture/Discussion</th>
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<tbody>
<tr>
<td>Title for CMS (not more than 30 characters) Inst Sprvsn Coord I of CTE</td>
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<thead>
<tr>
<th>Cross Listed?</th>
<th>If yes, do they meet together and fulfill the same requirement, and what is the other course.</th>
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<tbody>
<tr>
<td>Yes ___ No X ___</td>
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<table>
<thead>
<tr>
<th>How Many Times Can This Course be Taken for Credit?</th>
<th></th>
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<tbody>
<tr>
<td>1</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Can the course be taken for Credit more than once during the same term?</th>
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<tbody>
<tr>
<td>Yes ___ No ___</td>
<td></td>
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</tbody>
</table>


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/acaft/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.

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:

<table>
<thead>
<tr>
<th>Department Chair:</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3/17/09</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>College Dean or Associate Dean:</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3/30/09</td>
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<table>
<thead>
<tr>
<th>CPSP (for school personnel courses ONLY)</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>3/30/09</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Associate Vice President and Dean for Academic Programs</th>
<th>Date</th>
</tr>
</thead>
</table>

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.

9/10/2008