Course Change Proposal
Form A

Academic Group (College): ECS
Academic Organization (Department): Computer Science
Date: April 15, 2009

Type of Course Proposal:
New ___ Change ___x___ Deletion ___

Department Chair: Du Zhang
Submitted by: Anne-Louise Radimsky

Does this course fulfill a requirement for single-subject or multiple subject credential students? Yes ___ No ___
For Catalog Copy: Yes ___x___ No ___
CCE (Extension): Yes ___ No ___
Semester Effective: Fall ___x___ Spring ___, 20_09__

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

| Change from: |
|-----------------|------------------|------|
| Subject Area (prefix) & Catalog Nbr (course no.): CSc 5 | Title: Personal Computing | Units: 3 |

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

JUSTIFICATION:
Update course description for CSc 5 to reflect changes in technology and terminology.

NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy. See http://www.csus.edu/aca/departments/crspsl.htm - Guidelines for Catalog Course Description)
An introduction to the role and use of personal computers, emphasizing the use and relevancy of common software for word processing, database, spreadsheet analysis, graphics, and communications. Examination of the personal computing milieu and the applications environment. Lecture two hours, technical activity and laboratory, two hours.

Note:
Prerequisite: None
Enforced at Registration: Yes ___ No ___
Corequisite: None
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): |
|-----------------|------------------|------|
| Lecture/lab 4 | Title for CMS (not more than 30 characters) Personal Computing |

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? ___1___

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/aca/fexample.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:

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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.

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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>
</tr>
</thead>
<tbody>
<tr>
<td>Department Chair:</td>
<td>4/24/2003</td>
</tr>
<tr>
<td>College Dean or Associate Dean:</td>
<td>4/24/2003</td>
</tr>
<tr>
<td>CPSP (for school personnel courses ONLY)</td>
<td></td>
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<tr>
<td>Associate Vice President and Dean for Academic Programs</td>
<td></td>
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</tbody>
</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.