# Course Change Proposal
## Form A

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Academic Organization (Department):</th>
<th>Date: 11/12/2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>Special Ed, Rehabilitation, School Psychology, and Deaf Studies</td>
<td></td>
</tr>
</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>Bruce Ostertag</td>
<td>Kathy Gee, Coordinator, Mod/Severe Credential</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 X</td>
<td>Fall X_ Spring , 2011</td>
</tr>
</tbody>
</table>

This course replaces experimental course Subject Area (prefix) and Catalog Number (course number): EDS 208

### Change from:

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog No. (course no.):</th>
<th>Title: Assessment &amp; Instructional Methods: Mod/Severe</th>
<th>Units:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDS 208</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

### Change to:

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog No. (course no.):</th>
<th>Title: Evidenced-Based Assessment and Instruction: Mod/Severe Disabilities</th>
<th>Units:</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDS 208</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

### JUSTIFICATION:

This title more accurately reflects best practice in the field.

### NEW COURSE DESCRIPTION: (Not to exceed 80 words, and language should conform to catalog copy.)

See [http://www.csus.edu/acaf/univmanual/crspsl.htm](http://www.csus.edu/acaf/univmanual/crspsl.htm) - Guidelines for Catalog Course Description

### 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): Seminar
- Title for CMS (not more than 30 characters): Evid-Base Assess Inst: Mod/Sev
- 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/academic/assessment.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 ____X__
Is this course required in a degree program (major, minor, graduate degree, certificate)? Yes ___ No ____
If yes, identify program(s): Mod/Severe Specialist Credential

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.

Accessibility: Following course approval, and prior to the start of the semester in which the new or revised course will be taught for the first time, an accessibility checklist [available at http://www.csus.edu/accessibility/checklist.html] shall be completed and submitted to the appropriate Dean's office. An accessible syllabus shall also be made available online, preferably prior to the start of that semester’s open registration period.

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: 11/29/10
Department Chair:

__________________________ Date: 12/1/10
College Dean or Associate Dean:

CPSP (for school personnel courses ONLY)

__________________________ Date: ____________________________
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.