# Course Change Proposal

## Form A

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Education</th>
<th>Academic Organization (Department):</th>
<th>Special Ed, Rehabilitation, School Psychology, and Deaf Studies</th>
<th>Date: 11/12/10</th>
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<tr>
<th>Type of Course Proposal:</th>
<th>New __ Change <em>X</em> Deletion ___</th>
<th>Department Chair:</th>
<th>Bruce Ostertag</th>
<th>Submitted by: Kathy Gee, Coordinator, Mod/Severe Credential</th>
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<tr>
<th>Does this course fulfill a requirement for single-subject or multiple subject credential students?</th>
<th>Yes <em>✓</em> No ___</th>
<th>For Catalog Copy:</th>
<th>Yes <em>✓</em> No ___</th>
<th>Semester Effective: Fall <em>X</em> Spring _, 2011</th>
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<tbody>
<tr>
<td>CCE:</td>
<td>Yes ___ No <em>✓</em></td>
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This course replaces experimental course Subject Area (prefix) and Catalog Number (course number):

| 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. | Yes ___ No ___ |

## Change from:

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog No. (course no.):</th>
<th>Title: Initial Seminar</th>
<th>Units:</th>
<th>1</th>
</tr>
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<tbody>
<tr>
<td>EDS 235</td>
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## Change to:

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog No. (course no.):</th>
<th>Title: Field Seminar in Program &amp; Instruction: Mod/Severe Disabilities</th>
<th>Units:</th>
<th>2</th>
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<tr>
<td>EDS 235</td>
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### JUSTIFICATION:

This change in both title and units is designed to accompany the students in the Mod/Severe specialist credential program as they take their methods classes in the program. By providing the students with direct assistance in the schools, the instructor will be able to guide their development of systematic instructional programs as well as augmentative communication systems. The time needed to cover the new CCTC requirements requires adding an additional unit to this seminar.

### 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)

This field seminar will provide group discussion as well as direct instructional guidance in the classrooms and schools in which the students in the Moderate/Severe Specialist Credential program are conducting their assignments.

### Note:

- **Prerequisite:** Enforced at Registration: Yes _No _X_

- **Corequisite:**
  - Enforced at Registration: Yes _No _X_

- **Graded:** Letter ___ Credit/No Credit _X_
- **Instructor Approval Required?** Yes _No _X

- **Course Classification (e.g., lecture, lab, seminar, discussion):**
  - Title for CMS (not more than 30 characters)
    - Field Sem Prog & Inst: M/Sev

- **Seminar**
  - 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/acaf/example.htm

This field seminar is designed to assist students to demonstrate knowledge and skills in the following areas:
- Collection and analysis of baseline data on individual student outcome measures,
- Design of individualized systematic instructional procedures,
- Ongoing progress monitoring measures for children/youth with severe disabilities,
- Problem solving for individual instruction of students.

**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:

Students will be evaluated on their ability to design baseline procedures, get data, and develop instruction that is individualized for at least 3 different students with severe disabilities. These are products that will be graded based on a rubric that the students will receive at the beginning of the seminar. There will also be one quiz after the first 5 seminar sessions related to the concepts and definitions of the terms used in program development.

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): Moderate/Severe Disabilities 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 ______

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: ____________

Department Chair: ____________________________

College Dean or Associate Dean: ____________________________

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.