**Course Change Proposal**

**Form A**

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Academic Organization (Department): EDS</th>
<th>Date: 11/12/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>Department Chair: Dr. Bruce Ostertag</td>
<td>Submitted by: Paula Gardner</td>
</tr>
</tbody>
</table>

**Type of Course Proposal:**
- New ___  Change _X__ Deletion ___

**Does this course fulfill a requirement for single-subject or multiple subject credential students?**
- Yes ___ No _X__

**For Catalog Copy:**
- Yes _X__ No ___

**CCE (Extension):**
- Yes ___ No _X__

**Semester Effective:**
- Fall _X__ Spring ___, 2011__

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

Y es ___  N o ___

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**Change from:**

<table>
<thead>
<tr>
<th>Subject Area <em>(prefix)</em> &amp; Catalog Nbr *(course no.):</th>
<th>Title: Initial Student Teaching-Mild Moderate</th>
<th>Units: 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDS 471</td>
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</table>

**Change to:**

<table>
<thead>
<tr>
<th>Subject Area <em>(prefix)</em> &amp; Catalog Nbr *(course no.):</th>
<th>Title: Initial Student Teaching-Mild Moderate</th>
<th>Units: 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>EDS 471</td>
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**JUSTIFICATION:**

In 2009 the California Commission on Teacher Credentialing adopted a new credential structure and standards in Special Education. The reduction of units from 5 units to 4 units is based on CCTC’s recommendation to explore methods to streamline the process and requirements for earning an Education Specialist Credential. EDS 471 is one of two culminating field experiences that will address the new and revised standards for the Mild Moderate Education Specialist Teaching Credential. This competency based initial credit/no credit student teaching experience will provide candidates with opportunities to understand and address issues of diversity that affect school climate, teaching, and learning, and to help candidates develop research-based strategies for improving learning outcomes for students with mild moderate disabilities.

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**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)

Credential candidates will student teach half day/five days per week for the full semester in a setting that serves students with mild/moderate disabilities. Cooperating teachers will work with the University supervisor to support the candidate in completing required assignments and competencies. An evaluation will be completed at the mid point and end of the semester. Note: Signature of credential candidates’ special education advisor is required on application for student teaching. **Graded:** Credit / No Credit. **Units:** 4.0

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**Note:**

Prerequisite: Admission to the Mild/Moderate Preliminary Education Specialist Credential Program and completion of coursework specified in program advisement plan.

**Enforced at Registration:** Yes _X__ No ___

**Corequisite:**

**Enforced at Registration:** Yes ___ No ___

**Graded:** Letter ___ Credit/No Credit ___

**Instructor Approval Required:** Yes ___ No ___

**Course Classification** *(e.g., lecture, lab, seminar, discussion):*

**Student Teaching Field Experience:**

**Title for CMS** *(not more than 30 characters)*

**Initial Stdt Tch:** Mild/Med

**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?**

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**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.

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 through observation by university supervisor and portfolio documentation of competence. Successful standard attainment will be measured by supervisors using the Directed Field Experience/Internship Procedural Handbook: Field Experience Evaluation Form.

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): Mild/Moderate Specialist Credential Program

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: ___________________________ 11/29/10

College Dean or Associate Dean: ___________________________ 12/1/10

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.

5/20/2010