Course Change Proposal
Form A

Academic Group (College): SSIS

Academic Organization (Department): ANTH

Date: April 13, 2011

Type of Course Proposal:
New ___ Change _X_ Deletion ___

Department Chair: R. Trichur

Submitted by: R. Trichur

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___

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.

Yes ___ No ___

Change from:
Subject Area (prefix) & Catalog Nbr (course no.): ANTH 599

Title: __________________________

Units: 1

Change to:
Subject Area (prefix) & Catalog Nbr (course no.): ANTH 599

Title: __________________________

Units: 1

JUSTIFICATION:

THIS FORM A IS TO ADDRESS EO1037. AN ANTH GRAD STUDENT TAKES THIS COURSE ON AVERAGE 12 TIMES. THUS, THE DEPARTMENTAL CURRICULUM COMMITTEE IS PROPOSING THAT ANTH 599 BE ALLOWED TO BE REPEATED 12 TIMES WITHOUT SPECIAL PETITION. NO OTHER CHANGES THAN THE CMS CODE FOR REPEATABILITY.

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

Note:

Prerequisite:
Enforced at Registration: Yes ___ 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):
Title for CMS (not more than 30 characters)

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? _12 TIMES (MAXIMUM OF 12 UNITS)___

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:

**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.

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.

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<tr>
<th>Signatures:</th>
<th>Date</th>
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<tbody>
<tr>
<td>Department Chair:</td>
<td>3/25/11</td>
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<tr>
<td>College Dean or Associate</td>
<td>4/23/11</td>
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<td>CPSP (for school personnel</td>
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<td>Associate Vice President</td>
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<td>and Dean for Academic</td>
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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