# Course Change Proposal

## Form A

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>HHS</th>
<th>Academic Organization (Department):</th>
<th>Criminal Justice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td>Nov. 24, 2009</td>
<td>Submitted by:</td>
<td>Will Vizzard</td>
</tr>
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<td></td>
<td>MAY 5, 2010</td>
<td>Department Chair:</td>
<td>Will Vizzard</td>
</tr>
</tbody>
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### 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___

### Catalog Copy:
- For Catalog Copy: Yes _X_ No ___
- CCE (Extension): Yes _X_ No ___

### Semester Effective:
- Fall _X_ Spring ___, 2010

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

| Yes ___ No ___ |

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.

### Change from:
- **Subject Area (prefix) & Catalog Nbr (course no.):**
- **Title:**
- **Units:**

### Change to:
- **Subject Area (prefix) & Catalog Nbr (course no.):** CrJ 190
- **Title:** Contemporary Issues In Criminal Justice
- **Units:** 3

### JUSTIFICATION:
This is a capstone course, which requires completion of the core as a prerequisite. CrJ 163 has been removed from the core, thus it should be removed from the prerequisites. There are no other changes.

### 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)

NA

### Note:

- **Prerequisite:** CRJ 101, CRJ 102, CRJ 121, CRJ 123, CRJ 130, CRJ 141, CRJ 160
- **Enforced at Registration:** Yes _X_ No ___

### Corequisite:
- **Enforced at Registration:** Yes _X_ 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 _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? ______

### 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
NA

**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:
NA

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.

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: ____________________________ 5/5/10
CPSP (for school personnel courses ONLY) ____________________________ 5/7/08
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.

9/10/2008