

ORIGINATOR'S SECTION:	
1. College: X CHABSS <input type="checkbox"/> CoBA <input type="checkbox"/> CoEHHS <input type="checkbox"/> CSM	Desired Term and Year of Implementation (e.g., Fall 2008): Fall 2015
2. Current Course abbreviation and Number: LBST300	

TYPE OF CHANGE(S). Check \checkmark all that apply.

Course Number Change	<input checked="" type="checkbox"/>	Delete Prerequisite	<input type="checkbox"/>	Other Prerequisite Change	<input type="checkbox"/>
Course Title Change		Add Corequisite	<input type="checkbox"/>	Grading Method Change	<input type="checkbox"/>
Unit Value Change	<input type="checkbox"/>	Delete Corequisite	<input type="checkbox"/>	Mode of Instruction Change (C/S Number)	<input type="checkbox"/>
Description Change		Add Consent for Enrollment	<input type="checkbox"/>	Consider for G.E. If yes, also fill out appropriate GE form.	<input type="checkbox"/>
Add Prerequisite	<input type="checkbox"/>	Delete Consent for Enrollment	<input type="checkbox"/>	Cross-list	<input type="checkbox"/>

Information in this section— both current and new – is required only for items checked (\checkmark) above.

NEW INFORMATION:

CURRENT INFORMATION:

3. Title:		Course abbreviation and Number: LBST 305
4. Abbreviated Title for Banner (no more than 25 characters):		Title: <i>(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)</i>
5. Number of Units:		Abbreviated Title for PeopleSoft: <i>(no more than 25 characters, including spaces)</i>
6. Catalog Description:		Number of Units:
		Catalog Description: <i>(Not to exceed 80 words; language should conform to catalog copy. Please consult the catalog for models of style and format; include all necessary information regarding consent for enrollment, pre- and/or corequisites, repeated enrollment, crosslisting, as detailed below. Such information does not count toward the 80-word limit.)</i>

7. Mode of Instruction* (See pages 17-23 at <http://www.calstate.edu/cim/data-elem-dic/APDB-Transaction-DED-SectionV.pdf> for definitions of the Course Classification Numbers)

Type of Instruction	Number of Credit Units	Instructional Mode (Course Classification Number)	Type of Instruction	Number of Credit Units	Instructional Mode (Course Classification Number)
Lecture			Lecture		
Activity			Activity		
Lab			Lab		

8. Grading Method:*

- Normal (N) (Allows Letter Grade +/-, and Credit/No Credit)
- Normal Plus Report-in-Progress (NP) (Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)
- Credit/No Credit Only (C)
- Credit/No Credit or Report-in-Progress Only (CP)

Grading Method:*

- Normal (N) (Allows Letter Grade +/-, and Credit/No Credit)
- Normal Plus Report-in-Progress (NP) (Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)
- Credit/No Credit Only (C)
- Credit/No Credit or Report-in-Progress Only (CP)

9. If the NP or CP grading system was selected, please explain the need for this grade option.

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*If Originator is uncertain of this entry, please consult with Program Director/Chair.

CURRENT INFORMATION:

NEW INFORMATION:

<p>10. Course Requires Consent for Enrollment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Faculty <input type="checkbox"/> Credential Analyst <input type="checkbox"/> Dean <input type="checkbox"/> Program/Department/Director/Chair Liberal Studies/Jocelyn Ahlers</p>	<p>Course Requires Consent for Enrollment? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Faculty <input type="checkbox"/> Credential Analyst <input type="checkbox"/> Dean <input type="checkbox"/> Program/Department/Director/Chair Liberal Studies/Jocelyn Ahlers</p>
<p>11. Course Can be Taken for Credit More than Once? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many times (including first offering)</p>	<p>Course Can be Taken for Credit More than Once? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many times (including first offering)</p>
<p>12. Is Course Cross Listed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course</p>	<p>Is Course Cross-listed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course and check "yes" in item #17 below.</p>
<p>13. Prerequisite(s):</p>	<p>Prerequisite(s):</p>
<p>14. Corequisite(s):</p>	<p>Corequisite(s):</p>
<p>15. Documentation attached: <input type="checkbox"/> Syllabus <input type="checkbox"/> Detailed Course Outline</p>	

PROGRAM DIRECTOR/CHAIR - COLLEGE CURRICULUM COMMITTEE SECTION:

(Mandatory information – all items in this section must be completed.)

16. Does this course fulfill a requirement for any major (i.e. core course or elective for a major, majors in other departments, minors in other departments)? Yes No
 If yes, please specify:

17. Does this course change impact other discipline(s)? *(If there is any uncertainty as to whether a particular discipline is affected, check "yes" and obtain signature.)* Check "yes" if the course is cross-listed. Yes No
 If yes, obtain signature(s). Any objections should be stated in writing and attached to this form.

Discipline _____	Signature _____	Date _____	Support _____	Oppose _____
Discipline _____	Signature _____	Date _____	Support _____	Oppose _____

18. Reason(s) for changing this course:
 We are working to clarify the numbering structure of LBST courses. Because we need the LBST 300 designation for a course that will be dual-listed with LBST 100, we would like to change the number of the course that is currently known as LBST 300: Perspectives in Liberal Studies to LBST 305: Perspectives in Liberal Studies. Everything else will remain the same.

SIGNATURES : (COLLEGE LEVEL) :

(UNIVERSITY LEVEL)

Jocelyn Ahlers 2/2/15
 1. Original (Please Print) Date

[Signature] 2/2/15
 2. Program Director/Chair Date

[Signature] 11/23/15
 3. College Curriculum Committee Date

[Signature] 11/19/15
 4. College Dean (or Designee) Date

5. UCC Committee Chair _____ Date _____

6. Vice President for Academic Affairs (or Designee) _____ Date _____

7. President (or Designee) _____ Date _____

