

<b>ORIGINATOR'S SECTION:</b>	
1. College: <input checked="" type="checkbox"/> CHABSS <input type="checkbox"/> CoBA <input type="checkbox"/> CoEHHS <input type="checkbox"/> CSM	Desired Term and Year of Implementation (e.g., Fall 2008): Fall 2016
2. Current Course abbreviation and Number: PSYC 495 <i>Field Experience in PSYC Settings</i>	

**TYPE OF CHANGE(S).** Check  all that apply.

Course Number Change	<input type="checkbox"/>	Delete Prerequisite	<input type="checkbox"/>	Other Prerequisite Change	<input type="checkbox"/>
Course Title Change	<input type="checkbox"/>	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 checked="" type="checkbox"/>
Description Change	<input type="checkbox"/>	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 () above.

**NEW INFORMATION:**

<b>CURRENT INFORMATION: PSYC 495</b>	Course abbreviation and Number: PSYC 495
3. Title:	Title: <i>(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)</i>
4. Abbreviated Title for Banner <i>(no more than 25 characters):</i>	Abbreviated Title for PeopleSoft: <i>(no more than 25 characters, including spaces)</i>
5. Number of Units:	Number of Units:
6. Catalog Description:	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)
Lecture	3	S-36
Activity		
Lab		

<b>8. Grading Method:*</b> <input type="checkbox"/> Normal (N) <i>(Allows Letter Grade +/-, and Credit/No Credit)</i> <input type="checkbox"/> Normal Plus Report-in-Progress (NP) <i>(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)</i> <input type="checkbox"/> Credit/No Credit Only (C) <input type="checkbox"/> Credit/No Credit or Report-in-Progress Only (CP)	<b>Grading Method:*</b> <input type="checkbox"/> Normal (N) <i>(Allows Letter Grade +/-, and Credit/No Credit)</i> <input type="checkbox"/> Normal Plus Report-in-Progress (NP) <i>(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)</i> <input type="checkbox"/> Credit/No Credit Only (C) <input type="checkbox"/> Credit/No Credit or Report-in-Progress Only (CP)
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9. If the NP or CP grading system was selected, please explain the need for this grade option.

<b>10. Course Requires Consent for Enrollment?_</b> <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	<b>Course Requires Consent for Enrollment?_</b> <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
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\*If Originator is uncertain of this entry, please consult with Program Director/Chair.

**CURRENT INFORMATION:**

**NEW INFORMATION:**

<b>11. Course Can be Taken for Credit More than Once?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many times (including first offering)	<b>Course Can be Taken for Credit More than Once?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many times (including first offering)
<b>12. Is Course Cross Listed:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course	<b>Is Course Cross-listed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course and check "yes" in item #17 below.
<b>13. Prerequisite(s):</b>	<b>Prerequisite(s):</b>
<b>14. Corequisite(s):</b>	<b>Corequisite(s):</b>
<b>15. Documentation attached:</b> <input type="checkbox"/> Syllabus <input type="checkbox"/> Detailed Course Outline	

**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:  
 Elective for PSYC and CHAD major and PSYC minor.

**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 \_\_\_\_\_ Support \_\_\_\_\_ Oppose  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
 Discipline \_\_\_\_\_ Support \_\_\_\_\_ Oppose  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

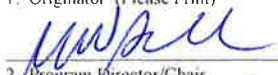
**18. Reason(s) for changing this course:**


This course is taught in a mode that is not accurately captured by the current CS number. ~~It is a course that meets for two hours a week as a seminar, with three additional hours of off-site laboratory activity.~~


**SIGNATURES : (COLLEGE LEVEL) :**

**(UNIVERSITY LEVEL)**

Miriam Schustack 2/10/2016  
 1. Originator (Please Print) Date

 2/10/16  
 2. Program Director/Chair Date

 2/24/16  
 3. College Curriculum Committee Date

 2/24/16  
 4. College Dean (or Designee) Date

\_\_\_\_\_  
 5. UCC Committee Chair Date

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

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 7. President (or Designee) Date

