

ORIGINATOR'S SECTION:	
1. College: <input type="checkbox"/> CHABSS <input type="checkbox"/> CoBA <input checked="" 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: HD 350 <i>Health and HD</i>	

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

Course Number Change	<input type="checkbox"/>	Delete Prerequisite	<input checked="" 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 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 checked="" 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:

CURRENT INFORMATION:			Course abbreviation and Number:		
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 (no more than 25 characters):			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* <i>(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)</i>					
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:*			Grading Method:*		
<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)			<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)		
9. If the NP or CP grading system was selected, please explain the need for this grade option.					
10. Course Requires Consent for Enrollment?_			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			<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		

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

CURRENT INFORMATION:

NEW INFORMATION:

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)	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)
12. Is Course Cross Listed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course	Is Course Cross-listed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course and check "yes" in item #17 below.
13. Prerequisite(s): ANTH 200, HD 101, PSYC 100, PSYC 220, and PSYC 230.	Prerequisite(s): ANTH 200, HD 101, HD 102, HD 220. Also, HD 230 or HD 231.
14. Corequisite(s):	Corequisite(s):
15. Documentation attached: <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:
Health Concentration for the Human Development major

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.

PSYC
Discipline

Signature _____

Date _____

Support _____ Oppose _____

Discipline _____

Signature _____

Date _____

Support _____ Oppose _____

18. Reason(s) for changing this course:

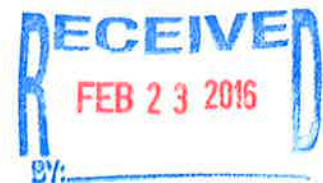
Curriculum revision *see attached*

SIGNATURES : (COLLEGE LEVEL) :

(UNIVERSITY LEVEL)

1. Originator (Please Print) Rodney Beaulieu Date 2-11-16
 2. Program Director/Chair *Alex M. L. Zuercher* Date 2/22/16
 3. College Curriculum Committee *Suzanne* Date 2/19/16
 4. College Dean (or Designee) *Jenise Garcia* Date 2/22/16

5. UCC Committee Chair _____ Date _____
 6. Vice President for Academic Affairs (or Designee) _____ Date _____
 7. President (or Designee) _____ Date _____



Virginia Mann

From: Alice Quioco
Sent: Thursday, February 25, 2016 6:41 PM
To: Virginia Mann
Subject: HD P2 Response
Attachments: Final P2 narrative with catalog copy.pdf

C-2
#18 response

Please find attached an updated P2 narrative that includes additional details about the specific program changes. I have included a copy of the current catalog, a marked up copy of the proposed revisions and supporting documents. I have included the curriculum worksheet. I would like to make a blanket rationale on the C2 form line #18 that states, based on our assessment report and self study Human Development has developed their own course in statistics and research methods specific to the field of Human Development. The proposed change is to amend the prerequisites from Psyc to HD. Finally I will be ccing you on emails to psychology, sociology, anthropology and mathematics. Please let me know if you need any additional information. I believe that I have addressed all of your requests.

I have paper copies of the documents so if you need paper copies, please let me know.

Alice

*Alice M.L. Quioco, Ed.D., Chair
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Professor Emerita, Language and Literacy
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California State University San Marcos
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*Okamae uahala, uahala ia (Ancient Hawaiian).
Leave the past where it is. Be in the present and be at peace.*