

<b>ORIGINATOR'S SECTION:</b>		
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	HD 495
2. Current Course abbreviation and Number: HD 495      Field Exp. In HD		

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 type="checkbox"/>
Description Change	<input checked="" 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:**

3. Title:			Course abbreviation and Number:		
4. Abbreviated Title for Banner (no more than 25 characters):			Title: (Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)		
5. Number of Units:			Abbreviated Title for PeopleSoft: (no more than 25 characters, including spaces)		
6. Catalog Description:  Supervised experience providing service in health and human services setting. Students will spend approximately eight (8) hours per week, for a minimum of 90 hours during the semester, in a child, adolescent and/or adult human services organization. Students will participate in service delivery, conduct observations, attend weekly class meetings, read related material and prepare written reports. May be repeated for a total of six (6) units, but no more than three (3) units of credit may be applied toward the major. Prerequisites: HD 304, and 12 units from concentration/option units completed.  <i>Restricted to students with Senior Standing in HD who have completed bwer-dio GE and Core HD requirements.</i>			Number of Units:		
7. Mode of Instruction* (See pages 17-23 at <a href="http://www.calstate.edu/cim/data-elem-dic/APDB-Transaction-DED-SectionV.pdf">http://www.calstate.edu/cim/data-elem-dic/APDB-Transaction-DED-SectionV.pdf</a> for definitions of the Course Classification Numbers)			Catalog Description: (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.)  Supervised experience providing service in health and human services setting. Students will spend approximately eight (8) hours per week, for a minimum of 90 hours during the semester, in a child, adolescent and/or adult human services organization. Students will participate in service delivery, conduct observations, attend weekly class meetings, read related material and prepare written reports. May be repeated for a total of six (6) units, but no more than three (3) units of credit may be applied toward the major. Prerequisites: HD 304, and 12 units from concentration/option units completed.		
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:* <input type="checkbox"/> Normal (N) (Allows Letter Grade +/-, and Credit/No Credit)			Grading Method:* <input type="checkbox"/> Normal (N) (Allows Letter Grade +/-, and Credit/No Credit)		

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

## CURRENT INFORMATION:

- ☐ 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)

## NEW INFORMATION:

- ☐ 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.

## 10. Course Requires Consent for Enrollment?

- ☐ Yes ☐ No
- X Faculty ☐ Credential Analyst ☐ Dean
- ☐ Program/Department/Director/Chair

## Course Requires Consent for Enrollment?

- ☐ Yes ☐ No
- ☐ Faculty ☐ Credential Analyst ☐ Dean
- ☐ Program/Department/Director/Chair

## 11. Course Can be Taken for Credit More than Once?

- ☐ Yes ☐ No
- If yes, how many times (including first offering)

## Course Can be Taken for Credit More than Once?

- ☐ Yes ☐ No
- If yes, how many times (including first offering)

12. Is Course Cross Listed: ☐ Yes ☐ No

If yes, indicate which course

Is Course Cross-listed? ☐ Yes ☐ No

If yes, indicate which course and check "yes" in item #17 below.

13. Prerequisite(s): Prerequisites: HD 304, and 12 units from concentration/option units completed. Students must have completed a pre-course orientation offered the prior semester.

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## 14. Corequisite(s):

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## 15. Documentation attached:

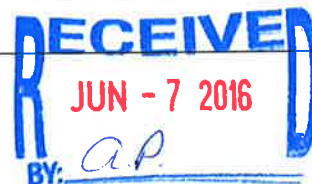
- ☐ Syllabus ☐ Detailed Course Outline

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:

Human Development Required course



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:

incorrect prerequisites submitted with previous form.

## SIGNATURES : (COLLEGE LEVEL) :

1. Originator (Please Print) Alice M. L. Quirocho 6/3/16 Date

2. Program Director/Chair Alice M. L. Quirocho 6/3/16 Date

3. College Curriculum Committee Denise Ganci 6-6-16 Date

4. College Dean (or Designee) Denise Ganci 6-6-16 Date

## (UNIVERSITY LEVEL)

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

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

7. President (or Designee) \_\_\_\_\_ Date