

<b>ORIGINATOR'S SECTION:</b>	
<b>1. College:</b> <input type="checkbox"/> CHABSS <input type="checkbox"/> CoBA <input checked="" type="checkbox"/> CoEHHS <input type="checkbox"/> CSM	<b>Desired Term and Year of Implementation (e.g., Fall 2008):</b> Fall 2017
<b>2. Current Course abbreviation and Number:</b> MSW 662	

**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 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 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:</b>	<b>Course abbreviation and Number:</b>
<b>3. Title:</b> Social Work with Older Adults	<b>Title:</b> (Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)
<b>4. Abbreviated Title for Banner</b> (no more than 25 characters):	<b>Abbreviated Title for PeopleSoft:</b> (no more than 25 characters, including spaces)
<b>5. Number of Units:</b>	<b>Number of Units:</b>
<b>6. Catalog Description:</b>  Social work practice with older adults. An ecosystemic and culturally competent approach to the biological, cultural, ethnic, gender, geographic, psychological, and social issues of relevance to older adults. Analysis of theories on aging. Assessments and interventions in social work with older adults population.	<b>Catalog Description:</b> (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 <u>not</u> count toward the 80-word limit.)  Examines an ecosystemic and culturally competent approach to the biological, cultural, ethnic, gender, geographic, psychological, and social issues of relevance to older adults. Explores theories on aging and assessments and interventions in social work with older adult populations.

RECEIVED  
DEC 14 2016  
BY: \_\_\_\_\_

**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		
Activity		
Lab		

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

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

## CURRENT INFORMATION:

## NEW INFORMATION:

9. If the NP or CP grading system was selected, please explain the need for this grade option.	
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	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
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): Admission to MSW Program, MSW 501	Prerequisite(s): none- remove prerequisites
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:

Required course for MSW program only.

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:


## SIGNATURES : (COLLEGE LEVEL) :

## (UNIVERSITY LEVEL)


Blake Beecher 9/19/2016  
 1. Originator (Please Print) Date

 9/19/2016

2. Program Director/Chair Date

 12-9-2016

3. College Curriculum Committee Date

 12-13-16

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