

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 2017
2. Current Course abbreviation and Number: SLP 495	


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:

CURRENT INFORMATION:

3. Title:	Course abbreviation and Number:
	Title: (Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)
4. Abbreviated Title for Banner (no more than 25 characters):	Abbreviated Title for PeopleSoft: (no more than 25 characters, including spaces)
5. Number of Units:	Number of Units:
6. Catalog Description:	Catalog Description: (conform to catalog copy style and format; include consent for enrollment, enrollment, crosslisting <u>not</u> count toward the 80
	<p>previous version of C-2 was Rec'd 8/29/16 & approved by uclom 10/3/16.</p>

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	C2
Activity		
Lab		

Type of Instruction	Number of Credit Units	Instructional Mode (Course Classification Number)
Lecture	3	S48
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)

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	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
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CURRENT INFORMATION:

NEW INFORMATION:

<input type="checkbox"/> Program/Department/Director/Chair	<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):	Prerequisite(s):
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 for the BS in SLP

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 would like to make this capstone course a hands-on laboratory style course with active case-based learning, simulations including with the use of manikins and standardized patients, off-campus screenings, interprofessional education (IPE) activities and application of research to clinical practice. As our BS program has cohorts of 50 students, we see it as a challenge for 1 instructor to handle 50 students in this type of laboratory/activity without assistance. We are developing this as a 3 hour 'course', with hands-on supervision in applied activities. We are coding this as an S48 to provide the appropriate WTUs for the faculty who will co-teach it. We anticipate 3-4 instructors/cohort. We have not changed the syllabus as the students will complete the same curriculum/tasks, only we have coded the course to reflect more hands-on support from the faculty.

SIGNATURES : (COLLEGE LEVEL) :

(UNIVERSITY LEVEL)

Suzanne Moineau 8/29/16

1. Originator (Please Print) _____ Date _____

2. Program Director/Chair _____ Date _____

3. College Curriculum Committee _____ Date _____

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 _____