California State University San Marcos • **COURSE CHANGE(S)** • **FORM C-2**

ORIGINATOR'S SECTION:		
1. College: ☒ CHABSS ☐ CoBA ☐ CoEHHS ☐ CSM	**Desired Term and Year of Implementation (e.g., Fall 2008):** Fall 2017	
2. Current Course abbreviation and Number: VSAR 318		

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

Course Number Change	☒	Delete Prerequisite	☐	Other Prerequisite Change	☐
Course Title Change	☐	Add Corequisite	☐	Grading Method Change	☐
Unit Value Change	☐	Delete Corequisite	☐	Mode of Instruction Change (C/S Number)	☐
Description Change	☐	Add Consent for Enrollment	☐	Consider for G.E. If yes, also fill out appropriate GE form.	☐
Add Prerequisite	☐	Delete Consent for Enrollment	☐	Cross-list	☐

Information in this section– both current and new – is required only for items checked (√) above.

NEW INFORMATION:

CURRENT INFORMATION:

Course abbreviation and Number: AMD 330

CURRENT INFORMATION	NEW INFORMATION
3. Title:	**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:** *(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.)*

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

8. Grading Method:*	**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))	☐ 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?**
☐ Yes ☐ No
☐ Faculty ☐ Credential Analyst ☐ Dean
☐ Program/Department/Director/Chair | **Course Requires Consent for Enrollment?**
☐ Yes ☐ No
☐ Faculty ☐ Credential Analyst ☐ Dean
☐ 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? ☐ 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):	**Prerequisite(s):**
14. Corequisite(s):	**Corequisite(s):**
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:**   This course is an upper division studio course elective in the VSAR degree Arts & Technology option and is an upper division studio course elective in the proposed AMD degree.
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 a 400-level course and should be renumbered to reflect that.

SIGNATURES : (COLLEGE LEVEL) :   **(UNIVERSITY LEVEL)**

Lucy HG Solomon	08/30/2016		
1. Originator (Please Print)	Date	5. UCC Committee Chair	Date
[signature]	10-26-16		
2. Program Director/Chair	Date	6. Vice President for Academic Affairs (or Designee)	Date
[signature]	2/1/17		
3. College Curriculum Committee	Date	7. President (or Designee)	Date
[signature]	2/1/17		
4. College Dean (or Designee)	Date		