FORM X (WHITE)

* Authorization To Offer Non-Degree Extension Credit Course Through Extended Studies

1. Desired Term: Summer 2005
   Year of implementation: 2005

2a. Course abbreviation and Number: EDUC E1604
   2b. Abbreviated Title: Paraprofessional Training & Assessment Program

3. College: Education

4. Number of Units: 2
   5. Billing Units: 0

6. Allowed Student Levels: UG X GR EE (Default is to check all three levels)

7. Grading Method:
   Normal (N) (Default is Letter Grade +/- Students may request Credit/No Credit)
   Normal Plus Report-in-Progress (NP) (As for Normal; also allows Report-in-Progress)
   Credit/No Credit Only (C)
   Credit/No Credit or Report-in-Progress Only (CP)

8. Mode of Instruction:
   (See pages 17-23 at http://www.calsate.edu/cim/data-elm-der/DEd-Transaction-DEd-SectionY.pdf for definitions of the Course Classification Numbers)

   Type of Instruction | Number of Credit Units | Instructional Mode (Course Classification Number)
   Lecture            | 2                        |
   Activity           |                          |
   Lab                |                          |

9. Attributes:
   Course Requires Consent for Enrollment? Yes X No
   Faculty Credential Analyst Dean Program/Department - Director/Chair

   Prerequisites: N/A Co-requisites:

10. Does this course impact other discipline(s)? (If there is any uncertainty as to whether a particular discipline is affected, check "yes" and obtain signature) Yes X 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

Important: Please Complete

1. Instructor MARGE HOBBS

2. Please complete the Extension Course Proposal Form
   http://www.csusm.edu/academic_programs/Curriculum Forms/index.html

SIGNATURES: (COLLEGE LEVEL)

1. Program Director/Chair
   Signature: 5/27/05
   Date: 5/27/05

2. College Dean (or Designee)
   Signature: 5/21/05
   Date: 5/21/05

(UNIVERSITY LEVEL)

3. Dean of Extended Studies (or Designee)
   Signature: 6/20/05
   Date: 6/20/05

4. Vice President for Academic Affairs (or Designee)
   Signature: 6/3/05
   Date: 6/3/05
OFFICE OF EXTENDED STUDIES
EXTENSION COURSE PROPOSAL FORM

In planning the components of our Extended Studies program at Cal State San Marcos, this office consults closely with the academic colleges and departments to determine the suitability of course content, teaching methods and instructor qualifications. To assist us in evaluating your proposed course for credit, please submit this completed form—along with Form X: New Course Non-degree Credit—to our office as soon as possible. Questions before you submit? Call (760)750-4020.

- **Course Title:** Paraprofessional Training & Assessment Program (PTAP)

- **Course Description:** *(Please provide a short paragraph describing the purpose, topics and audience for your course. Be sure to include the benefits for students who take your course. An edited version of this description will be used for promotional copy.)*

  Designed to assist paraprofessionals in meeting No Child Left Behind requirements, this course will give them the skills, practice and content knowledge needed for effective support of student learning. The PTAP consists of ten 3-hour training sessions, that will include opportunities for classroom practice and school level support and training in the basics of reading, writing and mathematics as required under No Child Left Behind.

- **Course Objectives: (Provide specific student learning outcomes and how they will be achieved.)**
  1. To assist paraprofessionals to become NCLB compliant by January 8, 2006.
  2. To provide professional development to paraprofessionals to enhance their content knowledge and pedagogical skills in impacting student achievement.

- **Evaluation:** *(What will be the basis for grades? How will you know that the students have achieved the course objectives?)*

  Student presentation of Assessment Portfolio and a 20 item summative assessment. This will be a Credit/No Credit class.

- **Course Length:** *(How many actual contact hours in class? Note: Credit courses must contain a minimum of fifteen 50-minute contact hours for each semester unit of credit, and outside of class work by students is required.)*

  Ten 3-hour sessions

- **Proposed Date(s):**
  - January 5, 12, 19, 2005
  - February 2, 9, 16, 2005
  - March 9, 23, 2005
  - April 6, 13, 2005
  - April 15-June 2005
  - Periodically throughout 2005

- **Location:** *(Indicate if you are proposing this course to be scheduled and offered in our facilities, or if this course is to be held at an off-campus location, such as a school, district or county office, company, etc.)*

  North County Professional Development Center
  125 Vallecitos de Oro, Ste. D
  San Marcos

- **Support Needs:** *(Please indicate any special services you will need, such as audio-visual equipment, photocopying, room set-up, etc.)* N/A

- **Comments:** *(Please add any other relevant information, such as whether or not the course has been taught elsewhere successfully, why the course is needed in our area, marketing suggestions, etc.)*

When completed, please return this form, along with an up-to-date resume (with teaching references) to: Trish Henlon, Office of Extended Studies, Cal State San Marcos, 333 S. Twin Oaks Valley Rd., San Marcos, CA 92096; FAX: (760)750-3138; E-mail: thenlon@csusm.edu