California State University, San Marcos

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

1. Desired Term: Winter
   Year of implementation: 2015

2a. Course abbreviation and Number: SLP/611
   2b. Abbreviated Title: CFA RES ARTIC
      (No more than 25 characters, including spaces)

3. College: CEHHS

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

6. Allowed Student Levels: UG GR X X EE X (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:

   Type of Instruction | Number of Credit Units | Instructional Mode (Course Classification Number)
   Lecture | 2 | c-05
   Activity
   Lab

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

   Prerequisites:
   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
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Important: Please Complete

1. Instructor Alison Scheer-Cohen
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 Date 4-27-15
2. College Dean (or Designee)
   Signature Date

(UNIVERSITY LEVEL)
3. Dean of Extended Studies (or Designee)
   Signature Date 5/15/15
4. Vice President for Academic Affairs (or Designee)
   Signature Date

[Signature and Date]
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:**
  Craniofacial Anomalies – Resonance and Articulation Disorders

- **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.)

This course will focus on formal and informal evaluation of articulation and resonance for children with cleft lip/palate and/or craniofacial anomalies. Both standardized and criterion referenced assessments to evaluate articulation, in addition to perceptual and low-tech evaluations of resonance will be discussed. Speech therapy targeting articulation and resonance will highlight general principles, low-tech therapy tools, and motor learning and memory, in addition to goals, methods, data collection, and interpretation of results.

- **Course Objectives:** (Provide specific student learning outcomes and how they will be achieved.)
  1. Students will demonstrate knowledge and skills in formally (e.g., standardized assessments) and informally (e.g., criterion referenced assessment; phonetic transcription) assessing speech related to cleft lip/palate and/or craniofacial anomalies.
  2. Students will assess resonance and nasal airflow using a variety of methods (e.g., perceptual judgments; low-tech methods).
  3. Students will demonstrate knowledge and skills of intervention related to articulation and resonance disorders in children with cleft lip/palate and craniofacial anomalies using theoretical principles (e.g., motor learning) and low-tech equipment (e.g., listening tube).
  4. Students will co-teach one class and disseminate an associated assignment on assessment or intervention in children with cleft lip/palate and/or craniofacial anomalies in SLP 665.

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

| Case Study: Formal assessment of articulation | 20 points |
| Case Study: Informal assessment of articulation | 20 points |
| Case Study: Perceptual and low-tech evaluation of resonance | 20 points |
| Lesson Plan: School-age child; articulation | 20 points |
| Lesson Plan: School-age child; resonance | 20 points |
| EDSL 665 lesson development and implementation | 50 points |

- **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.)

  3 hour session (2 units)
Proposed Date(s):

Class to be scheduled in Winter Intercession. Dates to be determined.

10-3 hour sessions.

- 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.)

Location TBD.

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

Smart classroom required.
Cougar Courses Container required.

- 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.)

This course is required as part of an OSEP grant which has been funded through the department of Speech Language Pathology.