

ORIGINATOR'S SECTION:	
1. College: <input checked="" type="checkbox"/> CHABSS <input type="checkbox"/> CoBA <input 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: MDIA 499	

TYPE OF CHANGE(S). Check \checkmark all that apply.

Course Number Change	<input checked="" 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 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 (\checkmark) above.

NEW INFORMATION:

CURRENT INFORMATION:	Course abbreviation and Number: MDIA 499
3. Title:	Title: <i>(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)</i> Independent Study
4. Abbreviated Title for Banner <i>(no more than 25 characters):</i>	Abbreviated Title for PeopleSoft: <i>(no more than 25 characters, including spaces)</i> Independent Study
5. Number of Units:	Number of Units: 1-3
6. Catalog Description: May be used by students who desire to do individualized projects with a professor. <i>May be repeated for a total of six (6) units. MASS MDIA 495 and MASS-MDIA 499 may total no more than six (6) units applied toward the major. Enrollment restricted to students who have obtained consent of instructor.</i>	Catalog Description: <i>(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.)</i> May be used by students who desire to do individualized projects with a professor. <i>May be repeated for a total of six (6) units. MDIA 495 and MDIA 499 may total no more than six (6) units applied toward the major. Enrollment restricted to students who have obtained consent of instructor.</i>



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:* <input type="checkbox"/> Normal (N) <i>(Allows Letter Grade +/-, and Credit/No Credit)</i> <input type="checkbox"/> Normal Plus Report-in-Progress (NP) <i>(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)</i> <input type="checkbox"/> Credit/No Credit Only (C) <input type="checkbox"/> Credit/No Credit or Report-in-Progress Only (CP)	Grading Method:* <input type="checkbox"/> Normal (N) <i>(Allows Letter Grade +/-, and Credit/No Credit)</i> <input type="checkbox"/> Normal Plus Report-in-Progress (NP) <i>(Allows Letter Grade +/-, Credit/No Credit, and Report-in-Progress)</i> <input type="checkbox"/> Credit/No Credit Only (C) <input type="checkbox"/> Credit/No Credit or Report-in-Progress Only (CP)
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*If Originator is uncertain of this entry, please consult with Program Director/Chair.

CURRENT INFORMATION:

NEW INFORMATION:

<p>9. If the NP or CP grading system was selected, please explain the need for this grade option.</p>	
<p>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</p>	<p>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</p>
<p>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)</p>	<p>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)</p>
<p>12. Is Course Cross Listed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course</p>	<p>Is Course Cross-listed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course and check "yes" in item #17 below.</p>
<p>13. Prerequisite(s):</p>	<p>Prerequisite(s):</p>
<p>14. Corequisite(s):</p>	<p>Corequisite(s):</p>
<p>15. Documentation attached: <input type="checkbox"/> Syllabus <input type="checkbox"/> Detailed Course Outline</p>	

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:
 Elective for Media Studies major.

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.

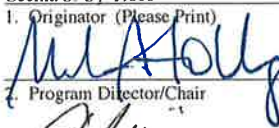


 Discipline _____ Signature _____ Date _____ Support _____ Oppose _____

 Discipline _____ Signature _____ Date _____ Support _____ Oppose _____

18. Reason(s) for changing this course:
 Program name and abbreviation change.

SIGNATURES : (COLLEGE LEVEL) :

(UNIVERSITY LEVEL)

Cecilia S. Uy-Tioco _____ Date 4/11/2017
 1. Originator (Please Print)

 2. Program Director/Chair _____ Date 4/18/17

 3. College Curriculum Committee _____ Date 5/3/17

 4. College Dean (or Designee) _____ Date 5/3/17


 5. UCC Committee Chair _____ Date _____

 6. Vice President for Academic Affairs (or Designee) _____ Date _____

 7. President (or Designee) _____ Date _____