

1. College: CHABSS

2. Desired term Fall and year 2018 of implementation for this deletion.

**CURRENT INFORMATION:**

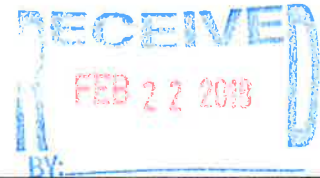
3. Course abbreviation and Number: <u>SOC 523</u>
4. Title: <u>Seminar in Community and Mental Health</u>
5. Number of Units: <u>2</u>
6. Is the Course Crosslisted? <u>Yes</u> <input checked="" type="checkbox"/> <u>No</u> <input checked="" type="checkbox"/>
If yes, indicate which course _____ and obtain signature in #8

**ADDITIONAL INFORMATION:**

7. Will the deletion impact the major? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe. other majors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe. student advising? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, please describe.
8. Will the deletion impact other discipline(s)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
9. Reason(s) for deleting this course: <b>The Master of Arts in Sociological Practice program is streamlining the elective offerings that we offer. We are eliminating ten of the existing seminars that are in the catalog and replacing them with four broadly constructed seminars.</b>

**SIGNATURES:**

1. Originator (Please Print) <u>Rehelle Strom</u> <u>10/25/17</u> Date	5. UCC Committee Chair _____ Date
2. Program/Center/Department - Chair/Director <u>[Signature]</u> <u>10-25-17</u> Date	6. General Education Committee Chair (if applicable) _____ Date
3. College Curriculum Committee <u>[Signature]</u> <u>12/6/17</u> Date	7. Vice President for Academic Affairs (or Designee) _____ Date
4. College Dean (or Designee) <u>Martin S. [Signature]</u> <u>12/6/17</u> Date	8. President (or Designee) _____ Date



RP Tracker