

→ WGSS 416

| | |
|---|---|
| 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 2018 |
| 2. Current Course abbreviation and Number: WMST 416 | |

TYPE OF CHANGE(S). Check 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 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 () above.

NEW INFORMATION:

Course abbreviation and Number:
 WGSS 416

CURRENT INFORMATION:

| | |
|--|---|
| 3. Title: | Title: <i>(Titles using jargon, slang, copyrighted names, trade names, or any non-essential punctuation may not be used.)</i> |
| 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> |
| 5. Number of Units: | Number of Units: |
| 6. Catalog Description: | 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> |

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:*

- 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)

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)

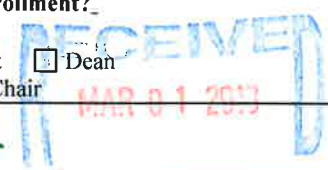
9. If the NP or CP grading system was selected, please explain the need for this grade option.

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.

PS _____
 RP _____
 Tracker _____

CURRENT INFORMATION:

NEW INFORMATION:

| | |
|--|--|
| 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) | 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) |
| 12. Is Course Cross Listed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate which course | Is Course Cross-listed? <input type="checkbox"/> Yes <input type="checkbox"/> 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: <input type="checkbox"/> Syllabus <input type="checkbox"/> 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 is an elective for the primary field in Social Sciences (primary field Women's Studies)

WMST BA + minor
LBST Border Studies

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.

LBST
 Discipline See email Signature 2-15-16 Date Support Oppose

Discipline _____ Signature _____ Date _____ Support Oppose

18. Reason(s) for changing this course:

Just an abbreviation and course name change to reflect department name change

SIGNATURES : (COLLEGE LEVEL) :

(UNIVERSITY LEVEL)

1. Originator (Please Print) Veronica Alvarez Date _____

2. Program Director/Chair See email Date _____

3. College Curriculum Committee [Signature] Date 2/11/16

4. College Dean (or Designee) _____ Date _____

5. UCC Committee Chair _____ Date _____

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

7. President (or Designee) _____ Date _____

From: Veronica Anover
Sent: Thursday, February 15, 2018 9:47 PM
To: Angela Baggett
Cc: Carrick Williams; Veronica Anover
Subject: FW: More courses from WMST (soon-to-be WGSS) for your approval

Dear Angie (and Carrick),

The chair of LBST approved the changes for the courses that I listed below.

Thank you,
Veronica

Dr. Veronica Anover
Professor, French and Spanish / Modern Language Studies Department
Chair / Women Studies Department
Interim Faculty Director / Office of Service Learning / Division of Community Engagement
Markstein Hall 224
California State University San Marcos
San Marcos, CA 92096

Tel: (760) 750-4143
Fax: (760) 750-3120
<http://www.csusm.edu/modernlanguages/>

“When I let go of what I am, I become what I might be.” – [Lao Tzu](#)

Please consider making a tax deductible contribution to help students study abroad by donating to our recently endowed foundation, “The Lucas Dunn Memorial Scholarship”: www.csusm.edu/donation Or you may contact me directly vanover@csusm.edu and I will assist you with your donation. Thank you very much. (For additional information, you may like to read these articles about the scholarship: <http://news.csusm.edu/memory-of-lucas-dunn-lives-on-in-french-study-abroad-scholarship/> and <http://csusmchronicle.com/15108/features/living-a-life-to-remember/>)

From: Veronica Anover
Sent: Thursday, February 15, 2018 9:44 PM
To: Kimberley Knowles-Yanez <kyanez@csusm.edu>
Subject: RE: More courses from WMST (soon-to-be WGSS) for your approval

Dearest Kim,

Thank you very much for taking the time to review and to approve the changes on the C2 forms for WGSS 330, WGSS 343, WGSS 370, WGSS 416, WGSS 424, WGSS 445, and WGSS 490 ☺.

I am very grateful for your support.

Kindest wishes,
Veronica

Dr. Veronica Anover
Professor, French and Spanish / Modern Language Studies Department
Chair / Women Studies Department
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From: Kimberley Knowles-Yanez
Sent: Thursday, February 15, 2018 11:16 AM
To: Veronica Anover <vanover@csusm.edu>
Subject: RE: More courses from WMST (soon-to-be WGSS) for your approval

Hi Veronica-
On behalf of LBST, I approve all of these forms. Thank you for the opportunity to review them and for your succinct explanation of the changes below. Best, Kim

From: Veronica Anover
Sent: Tuesday, February 13, 2018 7:24 PM
To: Kimberley Knowles-Yanez <kyanez@csusm.edu>
Subject: More courses from WMST (soon-to-be WGSS) for your approval

Dear Kim,

As you know WMST submitted to CAPC a P-Form and many C2-Forms for each WMST to be changed to WGSS to match the new department name: Women’s, Gender and Sexuality Studies.

CAPC found out that the courses that I am attaching are also used by LBST. Hence, my message, asking you to review these forms for your approval. The courses that will be WGSS and that are WMST now have not changed other than the title and adding the words “gender” and/or “sexuality” to better align with the new name.

I thank you in advance for your consideration and support, and I look forward to hearing from you soon. Of course, if you have any questions, let me know.