CBM003 ADD/CHANGE FORM UC 8629 05F

☑ Undergraduate Council	or Graduate/Professional Studies Council
⊠ New Course ☐ Course Change	☐ New Course ☐ Course Change
Core Category: Effective Fall $\frac{200}{4}$	Effective Fall
Department: CUIN College: EDUC	
2. Person Submitting Form: <u>OLENCHAK</u> Te	lephone: 3-4984 5007 \$ 7 100 Q 3 1 3 3 3 3
<ul> <li>Course Information on New/Revised course:</li> <li>Instructional Area / Course Number / Lon CUIN / 3333 / DIFFERENTIATING INS</li> </ul>	
<ul> <li>Instructional Area / Course Number / Sho CUIN / 3333 / DIFF INST FOR DIVERS</li> </ul>	ort Course Title (30 characters max.)
• SCH: <u>3.00</u> Level: <u>JR</u> CIP Code:	Lect Hrs: 3 Lab Hrs:
4. Justification for adding/changing course: <u>To</u>	meet professional/accreditation standards
<ul> <li>5. Was the proposed/revised course previously If Yes, please complete:</li> <li>Instructional Area / Course Number / Lor</li> <li>//</li></ul>	offered as a special topics course?  Yes No
Content ID: Start Date (yyyy3):	
6. Is this course offered for undergraduate cred	it only? X Yes No
<ul> <li>7. Authorized Degree Program(s): B.S INDIST</li> <li>Does this course affect major/minor requi</li> <li>Does this course affect major/minor requi</li> <li>Are special fees attached to this course?</li> <li>Can the course be repeated for credit?</li> </ul>	irements in the College/Department?
8. Grade Option: Letter (A, B, C) Inst	ruction Type: lecture
the course inventory: Instructional Area / Co	
Start Date (yyyy3): Content I.I.	D.:
10. Proposed Catalog Description: Cr. (3-6). Prerequisites: Admission to Teac	her Certification Program Description (30 words max.):
Curricular, instructional, and managerial tec	hniques for use with diverse learners.
11. Dean's Signature: L. Le. Am PL	Date: 1-/14/.,-
Print/Type Name: Dr. Robert H. McPherson	