CBM003 ADD/CHANGE FORM

Undergraduate Council  ☑ New Course  ☑ Course Change
Core Category: NONE  Effective Fall 2009

or  ☐ Graduate/Professional Studies Council
☐ New Course  ☐ Course Change
Effective Fall __________

1. Department: COMD  College: CLASS
2. Person Submitting Form: Sandra Gold-Singleton  Telephone: 3-2893
3. Course Information on New/Revised course:
   • Instructional Area / Course Number / Long Course Title:
     ASLI / 2322 / Education of the Deaf
   • Instructional Area / Course Number / Short Course Title (30 characters max.)
     ASLI / 2322 / EDUCATION OF THE DEAF
   • SCH: 3.00  Level: JR  CIP Code: 16.1601.00 01  Lect Hrs: 3.0  Lab Hrs: 0.0

4. Justification for adding/changing course: To provide for new discipline areas

5. Was the proposed/revised course previously offered as a special topics course? ☐ Yes  ☑ No
   If Yes, please complete:
   • Instructional Area / Course Number / Long Course Title:
     _____ / _____ / _____
   • Course ID: _____  Effective Date (M/D/YY) : _____

6. Authorized Degree Program(s): ASLI BA (ASL Interpreter Program)
   • Does this course affect major/minor requirements in the College/Department?  ☑ Yes  ☐ No
   • Does this course affect major/minor requirements in other Colleges/Departments?  ☐ Yes  ☑ No
   • Are special fees attached to this course?  ☐ Yes  ☑ No
   • Can the course be repeated for credit?  ☐ Yes  ☑ No

7. Grade Option: Letter (A, B, C...)  Instruction Type: lecture ONLY  (Note: Lect/Lab info. must match item 3, above.)

8. If this form involves a change to an existing course, please obtain the following information from
   the course inventory: Instructional Area / Course Number / Long Course Title
   _____ / _____ / _____
   • Effective Date (M/D/YY) : _____  Course I.D.: _____

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
   Cr. 3. (3-0).  Prerequisites: none  Description (30 words max.): This course focuses on the historical and theoretical background of Deaf education including the variety of educational placement settings and the role and function of the interpreter in these environments.

10. Dean’s Signature: ___________________________  Date: 10/10/08
    Print/Type Name: Dr. Sarah Fishman