CBM003 ADD/CHANGE FORM

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

☐ 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 / 4489 / Internship in ASL Interpreting
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     ASLI / 4489 / INTERNSHIP IN ASL INTERPRETING
   - SCH: 4.00 Level: SR CIP Code: 16.1603.00 01 Lect Hrs: 4.00 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: 4. (4-0). Prerequisites: ASLI major, completion of all ASLI courses with GPA of 3.0 and permission
   of the instructor. Description (30 words max.): This course offers practical experience in ASL
   interpreting supervised by certified interpreters. Students will be able to gain experience in a variety of
   settings.

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