Curriculum Change Form
(Present only one proposed curriculum change per form)
(Complete only the section(s) applicable.)

Part I

(Check one)	Department Name	Curriculum & Instruction
___ New Course (Parts II, IV)	College	Education
X Course Revision (Parts II, IV)	*Course Prefix & Number	CED 840
___ Hybrid Course ("S," "W")	*Course Title (full title±)	Clinical X: Diagnosis and Prescription
___ New Minor (Part III)	*Program Title	
___ New Certificate (Departmental only)		
___ Program Suspension (Part III)		
___ Program Revision (Part III)	If Certificate, indicate Long-Term (University) or Short-Term (Departmental)	
	* Provide only the information relevant to the proposal.	± If Title is longer than 30 characters see Part IV to provide abbreviation

Proposal Approved by:	Date		Date
Departmental Committee	11/5/15	Council on Academic Affairs	3/24/16
College Curriculum Committee	12/1/15	Faculty Senate**	NA
General Education Committee*	NA	Board of Regents**	NA
Teacher Education Committee*	2/2/16	EFFECTIVE ACADEMIC TERM***	FALL 2016
Graduate Council*	2/26/16		

*If Applicable (Type NA if not applicable.)
**Approval needed for program revisions or suspensions.
***To be added by the Registrar's Office after all approval is received.

Completion of A, B, and C is required: (Please be specific, but concise.)

A. 1. Specific action requested: (Example: Increase the number of credit hours for ABC 100 from 1 to 2.)

Revise the title and credit limit for this course.

A. 2. Proposed Effective Academic Term: (Example: Fall 2012)

Fall 2016

A. 3. Effective date of suspended programs for currently enrolled students: (if applicable)

B. The justification for this action:

1. Course title included incorrect title for course in course description. It was listed correctly on the title of the curriculum change form from last year but not in section II of that form.

2. Clinical course may be taken multiple times by elementary concentration majors and requires that the credit limit be revised to allow registration for .5 to 1 cr. hr.; it also needs to be listed as repeatable to 2 cr. hours for students progressing more slowly in their program of study.

3. Remove pre-req. to streamline registration. CEDs are not always sequential.

C. The projected cost (or savings) of this proposal is as follows:

Personnel Impact: n/a

Operating Expenses Impact: n/a

Equipment/Physical Facility Needs: n/a

Library Resources: n/a

Part II. Recording Data for New, Revised, or Dropped Course
> (For a **new required course,** complete a separate request for the appropriate program revisions.)

1. For a new course, provide the catalog text.
2. For a revised course, provide the current catalog text with the proposed text using ~~strikethrough~~ for deletions and <u>underlines</u> for additions.
3. For a dropped course, provide the current catalog text.

New or Revised* Catalog Text
(*Use ~~strikethrough~~ for deletions and <u>underlines</u> for additions. Also include Crs. Prefix, No., and description, limited to 35 words.)
CED 840 Clinical X: ~~Diagnosis and Prescription~~ <u>Practicing Teaching</u>. (~~1~~ <u>.5-1</u>). ~~Prerequisites: CED 830~~. Supervised, sustained practice teaching experiences in an assigned instructional setting. Experiences include individual, small group and whole class teaching opportunities. <u>(school-embedded clinical experience – a minimum of 40-80 hours is required; additional hours may be required based upon candidate performance). May be retaken to a maximum of 2 hours.</u>

Part III. **Recording Data for Revised or Suspended Program**

1. For a revised program, provide the current program requirements using ~~strikethrough~~ for deletions and *underlines* for additions.
2. For a suspended program, provide the current program requirements as shown in catalog. List any concentrations and/or minors affected by the program's suspension.

Revised* Program Text
(*Use ~~strikethrough~~ for deletions and <u>underlines</u> for additions.)

Part IV. Recording Data for New or Revised Course (Record only **new or changed** course information.)

Course prefix (3 letters)	Course Number (3 Digits)	Effective Academic Term (Example: Fall 2012)	College/Division:	Dept. (4 letters)*
CED	840	Fall 2016	AS ___ HS ___ BT ___ JS ___ ED ___ UP ___	

Credit Hrs.	Weekly Contact Hrs.	Repeatable Maximum No. of Hrs. 2
.5-1	Lecture ___ Laboratory ___ Other ___	CIP Code (first two digits only)

Schedule Type* (List all applicable)	Work Load (for each schedule type)	Grading Mode*	Class Restriction, if any: (undergraduate only)
			FR ___ JR ___ SO ___ SR ___
		Grading Information: Course is eligible for IP (in-progress grading) for: Check all applicable	Course Title Abbreviation:(30 character limit)
		Thesis ___	
		Internship ___	
		Independent Study ___	
		Practicum ___	

CoRequisites and Prerequisites   **See definitions on following page**

Co-Requisite(s):   (List only co-requisites. See below for prerequisites and combinations.)

Course Prefix and No.	
Course Prefix and No.	

Prerequisite(s): (List prerequisites only.   List combinations below. Use **"and"** and **"or"** literally.)   (Specific minimum grade requirements should be placed in ( ) following courses. Default grade is D ⁻.)

Course Prefix and No.	~~CED 830~~
Course Prefix and No.	
Test Scores	
Minimum GPA (when a course grouping or student cumulative GPA is required)	

Co-requisite(s) and/or Prerequisite(s) Combination (Use **"and"** and **"or"** literally.) (Specific minimum grade requirements should be placed in ( ) following courses. Default grade is D-.)

Course Prefix and No.	
Test Scores	
Minimum GPA (when a course grouping or student cumulative GPA is required)	

Equivalent Course(s):   (credit will not be awarded for both…; or formerly…)

Course Prefix and No.	
Course Prefix and No.	
Course Prefix and No.	

Proposed General Education Element: Please mark (**X**) in the appropriate Element or Elements

Element 1 (9)	Element 2 (3)	Element 3 (6)	Element 4 (6)	Element 5 (6)	Element 6 (6)	Wellness
1A (3)	2 (3)	3A (3)	4(6)	5A (3)	6 (6)	
1B (3)		3B (3)		5B (3)		
1C (3)		*or* 3A/B Integrated A&H(6)				

NOTE: Do not forward validation tables with curriculum form.

(*Use Validation Tables.)