## change of COURSE PROPOSAL FORM

|  |  |
| --- | --- |
| Academic area: | School of Health Professions |
| PROGRAM: | AS CARDIOVASCULAR TECHNOLOGY |
| PROPOSEd by: | Jeff Davis |
| PRESENTER: | Jeff Davis |
| SUBMISSION DATE: | 1/29/2014 |
| CURRENT COURSE PREFIX, NUMBER AND TITLE: | **CVT 2840L Cardiovascular Practicum ii** |

### SECTION I

|  |  |
| --- | --- |
| TYPE(S) OF COURSE CHANGE: | TYPE PROPOSED CHANGE HERE FOR EACH ITEM CHECKED: |
|  | lecture/lab course must have “c” / lab course must have “l” |
|  | type new COURSE TITLE HERE |
|  | ENTER NEW SCHOOL, DIVISION, OR DEPARTMENT |
|  | LIST ALL PREREQUISITES IN SEQUENTIAL ORDER and include the minimum grade for each |
| **DO YOU ANTICIPATE THAT STUDENTS WILL BE TAKING ANY OF THE PREREQUISITES LISTED FOR THIS COURSE IN DIFFERENT PARTS OF THE SAME TERM?** | SELECT ANSWER |
|  | LIST ALL COREQUISITES IN SEQUENTIAL ORDER |
| **IS ANY COREQUISITE LISTED ON THIS COURSE LISTED AS A COREQUISITE ON ITS PAIRED COURSE?**  eXAMPLE: CHM 2032 IS A COREQUISITE FOR CHM 2032L AND CHM 2032L IS A COREQUISITE FOR CHM 2032. | SELECT ANSWER |
|  | from 6 to 3 credits |
|  | SELECT A CREDIT TYPE |
|  | 3 contact hours |
|  | SELECT GRADE MODE |
|  | |
| Type your course description as you would like it to appear in the catalog and syllabus. | |
|  | |
| Click here to enter topic outline. Feel free to use bullets to format the outline. | |

**** SELECT ANSWER

If yes, list below (for information purposes only). TYPE IN ALL OF THE LEARNING OUTCOMES, ASSESSMENTS, AND GENeral EDucation COMPETENCIES AS THEY SHOULD BE DISPLAYED IN THE SYLLABUS

|  |  |  |
| --- | --- | --- |
| LEARNING OUTCOMES | ASSESSMENTS | GENERAL EDUCATION COMPETENCIES |
|  |  |  |
|  |  |  |
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### SECTION II (must complete each item below)

|  |  |
| --- | --- |
| If you intend to restrict student registration based on the students’ major(s), enter all applicable major restriction codes: | CVTA |
| Is this an “International or Diversity Focus” course? | NO |
| Is this a General Education course? | NO |
| Is this a Writing Intensive course? | NO |
| Is this an Honors Course? | NO |
| Is this a Repeatable Course?\*  (A repeatable course may be taken more than one time for additional credits. For example, MUT 2641, a 3-credit hour course, can be repeated 1 time and a student can earn a maximum of 6 credits.)  \*not the same as Multiple Attempts or Grade Forgiveness  If “Yes”, what is the maximum number of credits a student can earn for this course? If “No”, enter NA. | NO  NA |
| Will these changes have an impact on other courses, programs, departments, or budgets? | NO |
| If “Yes”, please explain or submit comments below, if no enter NA | |
| NA | |
| If “Yes”, have you discussed this proposal with anyone (from other departments, programs, or other institutions) regarding the impact? Were any agreements made? | |
| na | |

### SECTION III (MUST COMPLETE EACH ITEM BELOW)

**PROVIDE JUSTIFICATION FOR EACH CHANGE ON THIS PROPOSED CURRICULUM ACTION (OTHER EXPLANATORY INFORMATION):**

CVT 2840L is a clinical course offered only in fall. instruction for this clinical is shared between edison clinical associates and assigned hospital personnel. the contact hours are aligned in a ratio to credit hours for CVT activities. instructional costs are primarily subsidized by course fees and through cooperating agency agreements. the change in credit hours is consistent with the current organization of this clinical. This curriculum action enables credit and clock hours to match in the catalog and for continuity of program operation. This credit hour change impacts only CVT Prefix courses as part of a program wide core credit realignment. THe credit realignment does not alter the total core credits (46) for CVTA majors.

**nOTE:** Changes for the Fall 2014 Term must be submitted by the January 2014 deadline and approved no later than the February 2014 Curriculum Committee meeting prior to the start of the next academic year. Changes during mid-school year are NOT permitted. Extreme circumstances will require approval from the appropriate dean as well as the Vice President, Academic Affairs to begin in either the spring or summer term.

**TERM IN WHICH PROPOSED ACTION WILL TAKE PLACE:**

FALL 2014

na

**oRDER OF APPROVAL FOR EXCEPTIONS IS AS FOLLOWS:**

SIGNATURE #1 NEEDED FOR EFFECTIVE TERM EXCEPTION:

dean \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE #2 NEEDED FOR EFFECTIVE TERM EXCEPTION:

VICE PRESIDENT, ACADEMIC AFFAIRS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FACULTY ENDORSEMENTS:**PLEASE SEPARATE FACULTY MEMBERS WITH A COMMA



**DEPARTMENT CHAIR / PROGRAM COORDINATOR ENDORSEMENT:**

 1/29/2014

**DEAN ENDORSEMENT:**

 2/5/2014

**DEANS’ COUNCIL Representative:**

 3/17/2014

**FOR CURRICULUM COMMITTEE MEETING DATE: March 28, 2014**

Completed curriculum proposals must be uploaded to Dropbox by the deadline. Please refer to the *Curriculum Committee Critical Dates for Submission of Proposals* document available in the document manager in the MyEdisonState Portal:

* Document Manager
* VP Academic Affairs
* Curriculum Process Documents