

**ACADEMIC AFFAIRS COMMITTEE  
RECOMMENDATION**

NO. 0405-152

MEETING DATE  
March 11, 2005

ORIGINATING CLUSTER NUMBER  
9

MOTION  
To approve the modification of SPA 1614, American Sign Language III effective FA/2005.

COMMITTEE RECOMMENDATION

APPROVED     NOT APPROVED (STATE REASON)     APPROVED WITH CHANGE (STATE CHANGE)

REASON NOT APPROVED OR CHANGED

CHAIR, ACADEMIC AFFAIRS COMMITTEE



DATE  
4/15/05

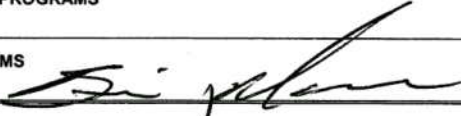
APPROVED     NOT APPROVED (STATE REASON)     APPROVED WITH CHANGE (STATE CHANGE)

REASON NOT APPROVED OR CHANGED

DIRECTOR, ASSOCIATE IN ARTS PROGRAMS

DATE

DIRECTOR, TECHNICAL PROGRAMS



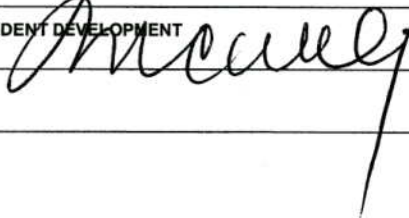
DATE  
4/21/05

APPROVED     NOT APPROVED (STATE REASON)     APPROVED WITH CHANGE (STATE CHANGE)

VICE PRESIDENT FOR EDUCATION AND STUDENT DEVELOPMENT

DATE  
4/28/05

BOARD OF TRUSTEES APPROVAL



DATE  
4/20/05

- NEW COURSE PROPOSAL  
 CHANGE IN COURSE PROPOSAL  
 REQUEST FOR COURSE TERMINATION

Cluster Number 9	Current or Proposed New Course Title American Sign Language III	Current or Proposed New Course Prefix /Number SPA 2614	Effective Term FA/05
Credit or PSAV Clock Hrs.	Current or Proposed Pre-requisite(s) (prefix/number) SPA 1613 and SPA 1613 L	Current or Proposed Co-requisite(s) (prefix/number) SPA 2614 L	
Lecture Credit Hrs. 1	Lab Credit Hrs.	Combination Lecture/ Lab Credit Hrs. ("C" course only)	Lab Facilities Available (new course proposal only)? If not, provide a list of needs and estimated costs. <input type="checkbox"/> Yes <input type="checkbox"/> No
General Education Category (check box if applicable): <input type="checkbox"/> Group I (communications, humanities) <input type="checkbox"/> Group II (mathematics, natural science) <input type="checkbox"/> Group III (social science)		Check Box for Course Type: <input checked="" type="checkbox"/> Transfer <input type="checkbox"/> Non-Transfer <input checked="" type="checkbox"/> Program Specified <input type="checkbox"/> Elective <input type="checkbox"/> College Prep <input type="checkbox"/> PSAV College Level Skills Required: <input type="checkbox"/> Writing <input type="checkbox"/> Reading <input type="checkbox"/> Math	
New Course Only: Minimum Faculty Credentials Required: <input type="checkbox"/> 18 credit hours in discipline <input type="checkbox"/> Other			

<b>Changing to: (complete each item)</b>	Credit Hrs. 3	Course Prefix/Number	Course Title
	Current Course Description Focuses on advanced skills in American Sign Language structure and regional idiomatic use of ASL with an emphasis on non-voiced conversational signed sentences. The student must take the Corequisite course SPA 2614L with the same instructor.		
	New Course Description Focuses on advanced skills in American Sign Language structure and regional idiomatic use of ASL with an emphasis on non-voiced conversational signed sentences. The student must take the Corequisite course SPA 2614L with the same instructor.		
	Pre-requisite(s)		Co-requisite(s)

Change in College Level Skills  Yes  No If yes, please indicate:  Writing  Reading  Math

If Change in Lab Fee, please indicate new amount. \$ \_\_\_\_\_ If Change in Course Status, please indicate:  Dual  Occupational

Rationale for New Course, Change in Course or Request for Course Termination (Please indicate how the proposal supports the college's mission and goals).  
 Change in credits is requested to align with requirements for transfer into four year colleges and universities.

Initiator Linda Horton	Date Submitted			
<b>REQUIRED SIGNATURES</b>	<b>APPROVED</b>	<b>APPROVED WITH CHANGES</b>	<b>NOT APPROVED</b>	<b>DATE</b>
Cluster Chairperson <i>[Signature]</i>				
Director – Associate in Arts Programs				
Director – Technical Programs <i>[Signature]</i>	✓			4/21/05
Director – Management Information Systems <i>[Signature]</i>	✓			4/25/05
Vice President – Education/Student Development <i>[Signature]</i>				4/29/05

**ADMINISTRATIVE USE ONLY**

Faculty Instructional Load	Number of Lecture Points 10	Number of Lab Points	Total Instructional Points Per Course	CCICS Number
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