GRADUATE COUNCIL REPORT
7 December 2006

CPSY 684 PROFESSIONAL INTERNSHIP

Changes in Course Description

FROM: Limited to advanced doctoral students; faculty supervised experience in approved professional employment settings; application for September assignments must be approved the previous October. May be repeated up to nine hours.

TO: Limited to advanced doctoral students; faculty supervised experience in approved professional public and mental health employment settings; application for September assignments must be approved the previous October. May be repeated up to nine hours.

Subject Matter Content Code:

FROM: 4206010001

TO: 4206010014
Academic Year 07-08

EDTC 651 COMPUTER-ASSISTED INSTRUCTION

Change in Prerequisite:

FROM: EDTC 645 or approval of instructor

TO: Approval of instructor

Subject Content Code:

1305010004
Academic Year 07-08

INTERACTIVE VIDEO/MULTIMEDIA: PRODUCTION AND UTILIZATION

EDTC 660

Change in Prerequisite:

FROM: EDIT 631 & 645 or approval of instructor

TO: EDTC 645 or approval of instructor

Subject Matter Content Code:

1002020019
Academic Year 07 – 08

Course Change Request

EPSY 610 HISPANIC BILINGUAL ASSESSMENT AND MONITORING STUDENTS

Change in CIP Code, Course Description
Texas A&M University

Departmental Request for a Change in Course
Undergraduate Graduate Professional
Submit original form and 2 copies.

1. This course is submitted by the Department of EDUCATIONAL PSYCHOLOGY

2. Course prefix, number and complete title of course: CPSY 684 Professional Internship

3. Change requested:
   a) Prerequisite(s): From [REDACTED] To [REDACTED]
   b) Withdrawal (reason) [REDACTED]
   c) Cross-list with [REDACTED] Cross-listed courses require the signatures of both department heads.
   d) Change in course title and description. Enter complete current course title and current course description; complete proposed course title and proposed course description in items 4 and 5.
   e) Change in credit/contact hours. Complete item 6b. Underscore change(s). Attach a course syllabus.*

4. Complete current course title and course description:
CPSY 684 PROFESSIONAL INTERNSHIP: Limited to advanced doctoral students; faculty supervised experience in approved professional employment settings; application for September assignments must be approved the previous October. May be repeated up to nine hours. Prerequisites: Completion of required course work except CPSY 684 and 691; approval of department head.

5. Complete proposed course title and course description (not to exceed 50 words):
CPSY 684 PROFESSIONAL INTERNSHIP: Limited to advanced doctoral students; faculty supervised experience in approved professional public and mental health employment settings; application for September assignments must be approved the previous October. May be repeated up to nine hours. Prerequisites: Completion of required course work except CPSY 684 and 691; approval of department head.

6. a) As currently in course inventory:

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Approval recommended by:

[Signature] [Name]
Head of Department Date

Chief, College Review Committee Date

Dean of College Date

Submitted to Coordinating Board by:

[Signature] [Name]
Dean of College Date

Director of Academic Support Services Date Effective Date

Attachment M
1. This course is submitted by the Department of EDUCATIONAL PSYCHOLOGY.

2. Course prefix, number and complete title of course: EDTC 651 COMPUTER-ASSISTED INSTRUCTION

3. Change requested:
   a) Prerequisite(s): From EDTC 645 or approval of instructor To Approval of instructor
   b) Withdrawal (reason)
   c) Cross-list with

   Cross-listed courses require the signatures of both department heads.

   d) Change in course title and description. Enter complete current course title and current course description; complete proposed course title and proposed course description in items 4 and 5.

   e) Change in credit/contact hours. Complete item 6b. Underline change(s). Attach a course syllabus.*

4. Complete current course title and course description

5. Proposed course title and course description (not to exceed 50 words)

6. a) As currently in course inventory:

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Approval recommended by: [Signature] 11/14/06

Head of Department Date

Chair, College Review Committee Date

Head of Department (if cross-listed course) Date

Dean of College Date

Submitted to Coordinating Board by:

Director of Academic Support Services Date Effective Date
Texas A&M University

Departmental Request for a **Change in Course**

Undergraduate Graduate Professional

Submit original form and 2 copies.

1. This course is submitted by the Department of **EDUCATIONAL PSYCHOLOGY**

2. Course prefix, number and complete title of course: **EDTC 660 INTERACTIVE VIDEO/MULTIMEDIA:**

3. Change requested:
   a) Prerequisite(s): From **EDTC 631 & 645 or approval of instructor** To **EDTC 645 or approval of instructor**
   b) Withdrawal (reason)
   c) Cross-list with
   d) **Change in course title and description.** Enter complete current course title and current course description; complete proposed course title and proposed course description in items 4 and 5.
   e) Change in credit/contact hours. Complete item 6b. Underscore change(s). Attach a course syllabus.*

4. Complete current course title and course description

5. Proposed course title and course description (not to exceed 50 words)

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   Approval recommended by:  
   
   Head of Department  
   Date

   Chair, College Review Committee  
   Date

   Head of Department (if cross-listed course)  
   Date

   Dean of College  
   Date

   Submitted to Coordinating Board by:

   Director of Academic Support Services  
   Date

   Effective Date

4 of 5 M
Texas A&M University

Formal Request for a Change in Course

Undergraduate  Graduate  Professional
Submit original form and 2 copies.

1. This course is submitted by the Department of __EDUCATIONAL PSYCHOLOGY__

2. Course prefix, number and complete title of course: __EPSY 610 Hispanic Bilingual Assessment and Monitoring Students__

3. Change requested: [CHP code]
   a) Prerequisite(s): From ____________________________ To ____________________________
   b) Withdrawal (reason) __________________________________________________________________
   c) Cross-list with _______________________________________________________________________

   **Cross-listed** courses require the signatures of both department heads.

   d) **Change in course title and description.** Enter complete current course title and current course description; complete proposed course title and proposed course description in items 4 and 5.

   e) Change in credit/contact hours. Complete item 6b. Underscore change(s). Attach a course syllabus.*

   4. Complete current course title and course description

   __EPSY 610 Hispanic Bilingual Assessment and Monitoring Students Assessing language ability; language assessment; evaluating and scoring different types of assessments. Prerequisites: Graduate Classification; approval of department head.

   5. Proposed course title and course description (not to exceed 50 words) __EPSY 610 Hispanic Bilingual Assessment and Monitoring Students Assessing language ability; language assessment; evaluating and scoring different types of assessments; guided field based experiences. Prerequisites: Graduate Classification; approval of department head.

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   Approval recommended by: __[Signature]__
   Head of Department  Date __1/14/06__
   Chair, College Review Committee  Date __11-17-06__
   Dean of College  Date __11-17-06__

Head of Department (if cross-listed course)  Date  5 of 5 M