Course Change Form

Date of Request: October 13, 2009
Page 1 of 2

Course Revision

Originator: Brandon Shigematsu
Department: Developmental Studies
Replacement Course ID:

1. Course Title: Intermediate Academic Communication
   Prefix & Num: ESOL 0400

2. Pre-requisite(s): TOEFL iBT Speaking Section: Scores of 18-25, or B or better on ESOL 0200 Basic Academic Communication
   Instructor permission required: No
   Co-requisite(s):
   Class Hours/Week: *LEC: 3.00  *LBC w/er: 0.00  *LNC w/no cr: 0.00
   Clinical: 0.00  Practicum: 0.00  Independent Study: 0.00
   Credits: 3.00

3. Semester to be Implemented: Spring, 2010
   Day ☑  Extended Day ☐
   Grade type Regular

4. Cost Code:
   Lab Fee: $0.00  Additional Fees: $0.00  Potential WLF: 0.00

Explanation of Fees:

5. Is this course designed for a specific group? Yes ☑ No ☐
   Who? Students whose native languages are other than English.

6. Catalog Description: ☐ Now in Print, or ☑ Proposed Below:
   This course is designed to prepare students for the challenges of college lectures with a wide range of listening, speaking, and note-taking strategies and skills. The course will introduce the college lectures drawn from a range of academic disciplines. In addition, the course will ensure that students learn the vocabulary used frequently in academic settings. Students will work with the instructor, in small groups, or with technology to practice the skills presented in this course.

7. Course justification (attach sheets if needed):
   (1) Course name changed; (2) pre-requisite changed; (3) credit- and contact-hour changed; and (4) course description changed.

8. Are library resources adequate to support this change? Yes ☐ No ☑
   If not, how are those resources to be acquired? In the next budget cycle, I will be proposing materials which will support this course.

9. Are technical and other resources available? Yes ☑ No ☐
   If not, how are those resources to be acquired?
   In the next budget cycle, I will be proposing materials which will support this course. In addition, it is hoped that this course will be self-sustaining based on enrollment costs and maybe an additional fee to be determined later.

10. Relationship to the curriculum: Would the course fill a G.E. requirement? Yes ☐ No ☑
     If yes, which G.E. area? If it does not fill a G.E. requirement, would the course offer elective credit? No ☑

11. Transferability of the course: List comparable courses at other colleges and universities:

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<th>G.E.</th>
<th>Elective</th>
<th>Course Title</th>
<th>Credits</th>
<th>Prefix &amp; Num.</th>
<th>Institution</th>
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Approval Signatures:

Department Chair: ____________________________ Date: __________

Associate Dean/Dean: __________________________ Date: __________

Curriculum Chair: ____________________________ Date: __________

Academic VP: ____________________________ Date: __________