GRADUATE COUNCIL COURSE CHANGE PROPOSAL

Please submit the typed original with all required signatures to the Graduate Council Course

syllabus must be attached and completed according to Fitchburg State guidelines

Form functionality most compatible using Adobe Acrobat 9 and newer.

Course Title: A	Assessment of Autism																												
Existing Banner Abbreviation:			s	s	Е	s	s	М	Е	Ν	Т		0	F		A	υ	т	I	s	М				Γ				
Proposed Banner Abbreviation: Banner limit of 30 characters, including punctuation, spaces, and special characters.			s	s	Е	s	S	М	E	N	Т		0	F		A	υ	Т	I	s	М								
Faculty member(s) who revised the course: Robert Shapiro																													
Contact Person: Ro							C	Grad	duat	te P	rog	ran	n Pi	rop	osir	ig C	har	nge	Ed	uca	atio	n		 	 				
Nature of course revision:																													
Course	Change in additional requirements																												
Course Credits						Course Title																							
Course Prerequisites							Description																						
Other (please specify):																													
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Course Revision Details (Please provide current and proposed version of changes):

Currently, SPED 8180 and SPED 8010 are listed as prerequisites for taking SPED 8041. However, SPED 8180 is typically taken after SPED 8041, and SPED 8010 is not required as part of the Autism endorsement program; therefore the proposed revision is to remove SPED 8180 and SPED 8010 as prerequisites for SPED 8041.

FITCHBURG STATE UNIVERSITY

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Rationale and expected outcomes for the course change:

The content knowledge in SPED 8180 and SPED 8010 is not required for success in SPED 8041.

Is this an Extended Campus course? OYes ONo Course syllabus must be attached and completed according to Fitchburg State guidelines.

Reviewed by Dean:

Print Form

Required Signatures—Graduate and Continuing Education Course Change Approval

Course Change Initiator: __Date: __Date: ___

Graduate Council Chair: ____Date: ____Date: ____

President: _____Date: _____Date: _____Date: _____

President: _____Date: _____Date: ______Date: ______Date: ______