

California State University, Long Beach
General Education Action Request

Instructions: Complete and submit all pages

RESET FORM

I. Course Identification

Dept. Prefix and Course Number: HSC 403 Official Course Title: Community Health Statistics
 Course Cross Listed: Yes No College: CHHS Dept. Prefix & Course Number: HSC 403

II. Course Coordinator

Faculty member(s) responsible for this course and this report: Selena Nguyen-Rodriguez & Wendy Nomura
 Phone: Selena: 562-985-2137 Wendy: 5-1537 Email: Selena.Nguyen-Rodriguez@csulb.edu or Wendy.Nomura@csulb.edu

III. Course History

Frequency of offering during past three years:
 Every semester Once a year Other (describe) _____
 Number of sections per offering 5 Number of instructors teaching the course 5

IV. Catalog Description (including prerequisites) If existing course, provide photocopy from catalog. If changes have occurred since catalog publication, attach signed Course Change Form.

HSC 403. Community Health Statistics (3)
 Prerequisites: GE Foundations; one or more explorations courses; upper division standing; and a grade of "C" or better in SOC 170 or PSY 110 or STAT 108 or STAT 118 or HDEV 190.
 Representative topics are descriptive statistics, sample designs, central tendency, and variability. Statistical tools for inferential analyses include hypothesis testing and parameter estimation.
 Letter grade only (A-F).

V. Requested GE Categories

Check "Add" if new to category; "Delete" if removing from category; "Continue" if PREVIOUSLY APPROVED BY GEGC, and there are no substantial changes.

Add	Delete	Continue	First Year Experience GE:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Written Communication (A.1)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Oral Communication (A.2)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Critical Thinking (A.3)</u>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Mathematics/Quant. Reasoning (B.2)</u>
Explorations:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Life Sciences (B.1.a)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Life Sciences No Lab (B.1.a.NL)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Physical Sciences (B.1.b)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Physical Sciences No Lab (B.1.b.NL)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>The Arts (C.1)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Humanities: Literature (C.2.a)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Humanities: Philosophy (C.2.b)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Humanities: Foreign Lang. (C.2.c)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>U.S. History (D.1.a)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Const. & American Ideals (D.1.b)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Social Sciences & Citizenship (D.2)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Lifelong Learning & Self-Dev. (E)</u>

Upper Division Requirements:

Add	Delete	Cont.	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Category B
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Category C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Category D

Capstones (F):

Add	Delete	Cont.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Interdisciplinary</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Advanced Skills</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Service Learning</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Writing Intensive</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Integrative Learning*</u>

*For majors only

Additional Requirements:

Add	Delete	Cont.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Human Diversity:</u> Consider for HD Status
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Global Issues:</u> Consider for Global Status

➤ Course may be Human Diversity or Global Issues, not both

VI. Essential GE Skills

Regardless of GE Category, each course must address GE Essential Skills. These are the GE Skills used for assessment in departmental progress reports. For more clarification on each skill, please see the description of the [Essential GE Skills](#) and their associated learning outcomes.

Level of emphasis in this course:

Using the list below, check the box indicating the extent to which each skill is addressed in this course. For the primary level of emphasis, your proposal must include a **minimum of two (2) skills, but no more than three (3) identified. These primary skills should be reflected in your Student Learning Outcomes (SLO).** Depending on the GE approval requested, some GE Essential Skills will be pre-determined for the primary level of emphasis, please consult the [Essential GE Skills](#) table for assistance. Please list any essential skills that are a secondary level of emphasis (these skills are addressed in the course, but are not the primary emphasis). Secondary skills do not have to be reflected in your SLOs. **Please leave blank any skills that are not a primary or secondary emphasis.** Please keep in mind that the ratings below determine the assessment in your departmental annual report on assessment and program self-study.

<u>Primary</u>	<u>Secondary</u>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Written Communication
<input type="checkbox"/>	<input type="checkbox"/>	Oral Communication
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Critical Thinking
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Quantitative Reasoning
<input type="checkbox"/>	<input type="checkbox"/>	Information Literacy
<input type="checkbox"/>	<input type="checkbox"/>	Teamwork
<input type="checkbox"/>	<input type="checkbox"/>	Inquiry and Analysis
<input type="checkbox"/>	<input type="checkbox"/>	Intercultural Knowledge
<input type="checkbox"/>	<input type="checkbox"/>	Ethical Reasoning
<input type="checkbox"/>	<input type="checkbox"/>	Creativity and Discovery
<input type="checkbox"/>	<input type="checkbox"/>	Foundation & Skills for Lifelong Learning
<input type="checkbox"/>	<input type="checkbox"/>	Interdisciplinary Learning
<input type="checkbox"/>	<input type="checkbox"/>	Social Responsibility and Civic Engagement
<input type="checkbox"/>	<input type="checkbox"/>	Problem Solving
<input type="checkbox"/>	<input type="checkbox"/>	Global Learning

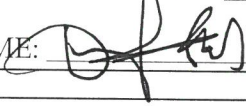
VII. All General Education Action Request (GEAR) forms must include the Standard Course Outline.

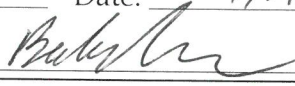
VIII. Department and College Review of GE Courses

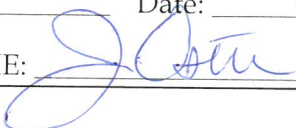
The GEGC recommends that Department and College Curriculum Committees review proposed GE courses in the context of the Department's and College's GE Course Inventory. New GE courses should fill a demonstrated curricular need, be viable and sustainable, as well as meet the GE Essential Skills and Student Learning Outcomes. Courses not meeting these expectations should be reconsidered.

IX. Required Signatures

By signing below, the department chair, college curriculum committee chair, and the college dean/associate dean verify that they have reviewed this action request and its supplemental materials for completeness, and attest to the appropriateness of the requested action.

Chair, Department of <u>Health Science</u>	Date: <u>Sept 9, 2018</u>
PRINT NAME: <u>TERRY ROBERTSON</u>	SIGN NAME: 

Chair, Curriculum Committee: College of <u>Health and Human Services</u>	Date: <u>9/14/18</u>
PRINT NAME: <u>BECKY NASH</u>	SIGN NAME: 

(Assoc.) Dean, College of <u>Health and Human Services</u>	Date: <u>9/14/18</u>
PRINT NAME: <u>Jennifer Obergan</u>	SIGN NAME: 

Submit Electronically

COURSE – CHANGE – UPPER-DIVISION/GRADUATE

Current Course Information: HSC 403 Community Health Statistics (3)

Items Changing (*only insert information that is changing - delete any empty lines*)

Prerequisite(s): Prerequisites: GE Foundations, one or more explorations courses; upper division standing; and a grade of "C" or better in SOC 170 or PSY 110 or STAT 108 or STAT 118 or HDEV 190.
Course Description: Representative topics are descriptive statistics, sample designs, central tendency, and variability. Statistical tools for inferential analyses include hypothesis testing and parameter estimation.
Letter grade only (A-F).

Classification: C4
Contact Hours Statement: Lecture 3 hours
:

=====

Fill out the following information for all as directed below..

CHANGE – Is this a minor or major description or title change? Minor

If these changes are major, please answer the following:

If the course is used in a degree, does it still meet the same degree requirements? Yes

If "No", please explain the differences:

DOUBLE-NUMBERED COURSES (e.g., 400/500): Is this course double-numbered? . Yes No

If so, a form is required for each course indicating the double-numbering on each form. Double-numbered courses must share the same course title, units, description, CS classifications, and grading options.

GRADING – (to be completed if changing grading option)

Select an option:

Request Report in Progress for this course: Select an option:

COURSE REPETITION – (*Delete all but the appropriate information.*)

Not applicable.

N/A

COURSE FEES - (*If initiating a new course fee or modifying a component of an existing course fee, i.e., course title, classification or number, please attach the approved "Request to Establish a Course Fee" form and contact your ASM.*)

Not applicable.

MULTIPLE OFFERING (CROSS-LISTING) - (*If cross-listed, notify other participating department of change. To request cross-listing, the same GE status must already be established.*)

Not applicable.

:

UNITS/CLASSIFICATION – (to be completed ONLY if changing units/classification)

3 units at C or S (1st shaded box: units, outlined square: C or S, 2nd shaded box: classification)

and unit at C

and unit at C

(If contact hours exceed units, an updated contact hours statement is required.)

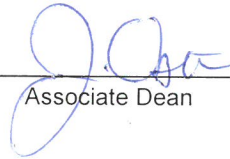
SPECIAL BEGIN DATE

SPECIAL END DATE

Recommended:


Chair / Director


Sept 4, 2018
Date


Associate Dean

9/14/18
Date

FILENAME: HHSC403.CHHS

Filename Format: Course Prefix (2-4 spaces) C (for change) Number (include suffix) . (a period) College Abbreviation (3 or 4 spaces) - Example: ENGLC370A.CLA

EPC CHAIR  DATE 09/14/18
BECKY NASH

