Course Change Request

Indiana University

IUPUI, IUEAA Campus

Check Appropriate Boxes: Undergraduate credit [ ] Graduate credit [ ] Professional credit [ ]

1. School/Division: School of Social Work
2. Academic Subject Code: SWK-S
3. Current Course Number: S634
4. Current Credit Hours: 3
5. Current Title: Comm Based Prac Child&Families
6. Effective Semester/Year for changes listed below: Summer - 4105
7. Instructor: McGuire

Type of Change Requested (Check appropriate boxes and indicate changes)

[ ] 8. Change course number to: ____________________________ (must be cleared with University Enrollment Services)
[ ] 9. Current course title: Comm Based Prac Child&Families
   Change to: Group and Community Based Practice with Children and Families
   Recommended abbreviation (optional): Group&Comm Based Prac Child&Fam
   (Limited to 32 Characters including spaces)
[ ] 10. Current credit hours fixed at: ____________ or variable from: ______________ to ______________
    Change to credit hours fixed at: ____________ or variable from: ______________ to ______________
[ ] 11. Current lecture contact hours fixed at: ____________ or variable from: ______________ to ______________
    Change to lecture contact hours fixed at: ____________ or variable from: ______________ to ______________
[ ] 12. Current non-lecture contact hours fixed at: ____________ or variable from: ______________ to ______________
    Change to non-lecture contact hours fixed at: ____________ or variable from: ______________ to ______________
[ ] 13. Is this course currently graded with S-F (only) grades? Yes ______ No ______
    Change to S-F (only) grading? Yes ______ No ______
[ ] 14. Does this course presently have variable title approval? Yes ______ No ______
    Is variable title approval being requested? Yes ______ No ______
[ ] 15. Is this course being discontinued? For all campuses _______ or for this campus only _______
[ ] 16. Current course description

Change course description to (not to exceed 50 words) This course will examine the development & build skills for the implementation of a wide range of prevention & intervention strategies to support child well-being provided at the community level. Special attention will be given to the philosophy of empowerment-oriented and client-driven service models. The course also provides frameworks for identifying and analyzing best practices in group and community-based services for children and families.

17. Justification for change Title did not include the groups component of the course content and description.
   (Use additional paper if necessary)
18. Are the necessary reading materials currently available in the appropriate library? ___________
19. A copy of every new course proposal must be submitted to departments, schools, or divisions in which there may be overlap of this course with existing courses or areas of strong concern, with instructions that they send comments directly to the originating Curriculum Committee. Please append a list of departments, schools, or divisions thus consulted.

Submitted by: ___________________________ Date: 2/11/10
Department Chairman/Division Director

Approved by: ___________________________ Date: 2/13/10
Dean

Dean of Graduate School (when required) Date

Chancellor/Vice-President Date

University Enrollment Services Date

After School/Division approval, forward the last copy (without attachments) to University Enrollment Services for initial processing, and the remaining four copies and attachments to the Campus Chancellor or Vice-President.