# Curriculum Change Form

(Present only one proposed curriculum change per form)

(Complete only the section(s) applicable.)

## Part I

<table>
<thead>
<tr>
<th>(Check one)</th>
<th>Department Name</th>
<th>Counseling and Educational Psychology</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Course (Parts II, IV)</td>
<td>College</td>
<td>Education</td>
</tr>
<tr>
<td>Course Revision (Parts II, IV)</td>
<td>*Course Prefix &amp; Number</td>
<td></td>
</tr>
<tr>
<td>Course Dropped (Part II)</td>
<td>*Course Title (30 characters)</td>
<td></td>
</tr>
<tr>
<td>New Program (Part III)</td>
<td>*Program Title</td>
<td>Human Services M.S.</td>
</tr>
<tr>
<td>x Program Revision (Part III)</td>
<td>(Major ___, Option ___; Minor ___; or Certificate ___)</td>
<td></td>
</tr>
<tr>
<td>Program Suspended (Part III)</td>
<td>*Provide only the information relevant to the proposal.</td>
<td></td>
</tr>
</tbody>
</table>

### Proposal Approved by:

<table>
<thead>
<tr>
<th>Departmental Committee</th>
<th>Date</th>
<th>Graduate Council*</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/16/07</td>
<td></td>
<td>10/29/07</td>
<td></td>
</tr>
</tbody>
</table>

**Is this a SACS Substantive Change?**

- Yes ****
- No x

### College Curriculum Committee

<table>
<thead>
<tr>
<th>Date</th>
<th>Council on Academic Affairs</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/4/07</td>
<td>Approved X Disapproved</td>
</tr>
</tbody>
</table>

### General Education Committee*

<table>
<thead>
<tr>
<th>Date</th>
<th>Faculty Senate**</th>
</tr>
</thead>
<tbody>
<tr>
<td>n/a</td>
<td>11/15/07</td>
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</tbody>
</table>

### Teacher Education Committee*

<table>
<thead>
<tr>
<th>Date</th>
<th>Board of Regents**</th>
</tr>
</thead>
<tbody>
<tr>
<td>n/a</td>
<td>Council on Postsecondary Edu.***</td>
</tr>
</tbody>
</table>

*If applicable (Type NA if not applicable.)

**Approval needed for new, revised, or suspended programs

***Approval/Posting needed for new degree program or certificate program

****If “yes”, SACS must be notified before implementation. Please contact EKU’s Office of Institutional Effectiveness.

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Completion of A, B, and C is required: (Please be specific, but concise.)

### A. 1. Specific action requested: (Example: To increase the number of credit hours for ABC 100 from 1 to 2.)

1. Drop the Community Agency Option. Changes in state law and national certification limited this option. Current students will be allowed to complete this option. No new students will be admitted beginning with the **Spring 2008** term.

2. Revise the Student Personnel Services in Higher Education Option. Three new courses have been developed to better meet current standards.

### A. 2. Effective date: (Example: Fall 2001)

- Summer 2008

### A. 3. Effective date of suspended programs for currently enrolled students: (if applicable)

### B. The justification for this action:

1. Change in state licensure laws and accreditation policy.

2. The curriculum needed to be updated to meet current practices.

### C. The projected cost (or savings) of this proposal is as follows:

#### Personnel Impact:

None

#### Operating Expenses Impact:

None

#### Equipment/Physical Facility Needs:

None

#### Library Resources:

None
Part III. Recording Data for New, Revised, or Suspended Program

1. For a new program, provide the catalog description as being proposed.
2. For a revised program, provide the current program requirements using strikethrough for deletions and underlines for additions.
3. For a suspended program, provide the current program requirements as shown in catalog. List any options and/or minors affected by the program’s suspension.

New or Revised* Program Text
(*Use strikethrough for deletions and underlines for additions.)

MASTER OF ARTS
Human Services: Student Personnel Services in Higher Education

CURRICULUM REQUIREMENTS

Major Requirements .............................................. 36 hours
Core ......................................................................... 24 15 hours
COU 804, 813, 840, 846, EPY 816, 839,869.

Student Personnel Services
in Higher Education .................................................. 42 15 hours
COU 844, 845, 860, 861, 862, POL 876, 877.

Community Agencies Option .................................... 12 hours
COU 803, 847, HEA 795, MGT 860.

Electives ........................................................................ 3 6 hours
To be selected with advisor approval.