

## Curriculum Change Form

**(Present only one proposed curriculum change per form)**  
**(Complete only the section(s) applicable.)**

**Part I**

(Check one) <input type="checkbox"/> New Course (Parts II, IV) <input type="checkbox"/> Course Revision (Parts II, IV) <input type="checkbox"/> Hybrid Course ("S," "W") <input type="checkbox"/> Course Dropped (Part II) <input type="checkbox"/> New Program (Part III) <input type="checkbox"/> Program Revision (Part III) <input checked="" type="checkbox"/> Program Suspended (Part III)	Department Name College *Course Prefix & Number *Course Title (30 characters) *Program Title *Provide only the information relevant to the proposal.	Special Education Education Director of Special Education Alternate Certification Program (Major __, Option __; Minor __; or Certificate _X_)
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Proposal Approved by:	<u>Date</u>		<u>Date</u>
Departmental Committee	5/5/2009	Graduate Council*	10/30/09
Is this a SACS Substantive Change? <b>Yes****</b> <input type="checkbox"/> <b>No</b> <input checked="" type="checkbox"/>		Council on Academic Affairs	
College Curriculum Committee	9/1/09	Approved <input checked="" type="checkbox"/> Disapproved	11/19/09
General Education Committee*		Faculty Senate**	
Teacher Education Committee*	9/22/09	Board of Regents**	
		Council on Postsecondary Edu.***	

\*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.**

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

<p><b>A. 1. Specific action requested:</b> (Example: To increase the number of credit hours for ABC 100 from 1 to 2.)</p> <p>Suspend the Director of Special Education Program Alternate Certification. The Education Professional Standards Board has requested this formal action to eliminate the program from their books. EKU has a Director of Special Education program that leads to certification in the field but not an alternative certification DoSE Program. <b>Please note that we only want to suspend the Alternative Certification Director of Special Education Program, and not the traditional Director of Special Education Program.</b></p> <p><b>A. 2. Effective date:</b> (Example: Fall 2001)</p> <p>Fall 2010</p> <p><b>A. 3. Effective date of suspended programs for currently enrolled students:</b> (if applicable)</p> <p>One enrolled. This student will be allowed to continue in the program until completion because the coursework she needs to complete the program is offered as part of our normal course offerings.</p>	
<p><b>B. The justification for this action:</b> The state department of education has us on record as offering this program as an alternative certification program. With only one student enrolled in the past 10 years, we would like to suspend the program and maintain the existing Director of Special Education Program.</p>	
<p><b>C. The projected cost (or savings) of this proposal is as follows:</b></p> <p><b>Personnel Impact: none</b></p> <p><b>Operating Expenses Impact: none</b></p>	

**Equipment/Physical Facility Needs: none**

**Library Resources: none**

**Part II. Recording Data for New, Revised, or Dropped Course**

(For a **new required course**, complete a separate request for the appropriate program revisions.)

- 40. For a new course, provide the catalog text.
- 41. For a revised course, provide the current catalog text with the proposed text using ~~strikethrough~~ for deletions and underlines for additions.
- 42. For a dropped course, provide the current catalog text.

New or Revised\* Catalog Text

(\*Use ~~strikethrough~~ for deletions and underlines for additions. Also include Crs. Prefix, No., and description, limited to 35 words.)

**Part III. Recording Data for New, Revised, or Suspended Program**

- 40. For a new program, provide the catalog description as being proposed.
- 41. For a revised program, provide the current program requirements using ~~strikethrough~~ for deletions and underlines for additions.
- 42. 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.)

**~~Professional Certificate for Director of Special Education~~**

~~The prerequisites for admission to the program for the Professional Certificate for Director of Special Education are:~~

- ~~(a) a valid Kentucky certificate for teachers of exceptional children (including speech language pathologists) or for school psychologists~~
- ~~(b) three years of experience as a full time teacher of exceptional children or speech language pathologist and/or three years of experience as a full time school psychologist~~
- ~~(c) a minimum of a master's degree or planned fifth year program.~~

~~**Prerequisite Courses\* .....12 hours**~~

~~\*The following or equivalent courses at the undergraduate or graduate level:  
SED 775 or 800, SED 790 (either SED 356, 793, 804, 806 or 809), 886.~~

~~COLLEGE OF EDUCATION~~

~~**Required Courses .....15 hours**~~

~~SED 810, 814, 816 (six hours), EAD 801.~~

~~For the Professional Certificate for Director of Special Education, candidates must enroll in SED 816 within three years of completing SED 810 and 814.~~

~~All required courses (EAD 801, SED 810, 814, and 816) must be completed within five years.~~