UC 9836 08F

CBM003 ADD/CHANGE FORM

\boxtimes	Undergraduate Council New Course Course Change ore Category: <u>NONE</u> Effective Fall <u>2009</u>	or	☐ Graduate/Professional Studies Council ☐ New Course ☐ Course Change Effective Fall
1.	Department: COMD College: CLASS		RECED/ED OCT 1 3 2008
2.	Person Submitting Form: Sandra Gold-Singleto	on Tele _l	phone: <u>3-2893</u>
3.	 Course Information on New/Revised course: Instructional Area / Course Number / Long Course Title: <u>ASLI</u> / <u>4357</u> / <u>Legal, Medical and Tri-lingual Interpreting</u> 		
	• Instructional Area / Course Number / Short Course Title (30 characters max.) <u>ASLI / 4357 / LEGAL, MED, AND TRI-LING INTERP</u>		
	• SCH: <u>3.00</u> Level: <u>SR</u> CIP Code: <u>16.1603</u>	3.00 01	Lect Hrs: 3-6 'Lab Hrs: 0-6 '
4.	. Justification for adding/changing course: To provide for new discipline areas		
5.	. Was the proposed/revised course previously offered as a special topics course? ☐ Yes ☒ No If Yes, please complete: • Instructional Area / Course Number / Long Course Title: //		
	• Course ID: Effective Date (M/D/	YY):	
 7. 	 Does this course affect major/minor requirements in the College/Department? Does this course affect major/minor requirements in other Colleges/Departments? Yes □ No Are special fees attached to this course? □ Yes □ No Can the course be repeated for credit? □ Yes □ No 		
	match item 3, above.)	J	
	If this form involves a change to an existing courthe course inventory: Instructional Area / Cours		·
	Effective Date (M/D/YY): Cou	arse I.D.:	
	Proposed Catalog Description: (If there are no proposed Catalog Description: (If there are no proposed Cr. 3. (3-0). Prerequisites: ASLI majory ASLI swords max.): This course focuses on interpreting involving trilingual interpreting will also be covered.	3334 or p g in legal ered.	permission of the instructor. Description (30 and medical settings. Theories and practices
10.	Dean's Signature:Print/Type Name: <u>Dr. Sarah Fishman</u>		Date: <u>/0//0/08</u>