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| For Academic Affairs and Research Use Only | |
| Proposal Number |  |
| CIP Code: |  |
| Degree Code: |  |

**New or Modified Course Proposal Form**

**[ ] Undergraduate Curriculum Council**

**[x ] Graduate Council**

|  |
| --- |
| **[ ]New Course, [ ]Experimental Course (1-time offering), or [ X]Modified Course (Check one box)** |

Signed paper copies of proposals submitted for consideration are no longer required. Please type approver name and enter date of approval.

|  |  |
| --- | --- |
| Wayne Wilkinson 4/1/2022 **Department Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **COPE Chair (if applicable)** |
| Asher Pimpleton-Gray 4/4/2022 **Department Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Head of Unit (if applicable)** |
| Wayne Wilkinson 4/13/2022  **College Curriculum Committee Chair** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Undergraduate Curriculum Council Chair** |
| Mary Jane Bradley 4/13/2022 **Director of Assessment (new courses only)** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **Graduate Curriculum Committee Chair** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date… **College Dean** | Alan Utter 4/25/2022  **Vice Chancellor for Academic Affairs** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enter date…  **General Education Committee Chair (if applicable)** |  |

1. **Contact Person (Name, Email Address, Phone Number)**

Blake Sandusky, wsandusky@astate.edu, 870-972-3064

1. **Proposed starting term and Bulletin year for new course or modification to take effect**

Fall 2022

**Instructions:**

*Please complete all sections unless otherwise noted. For course modifications, sections with a “Modification requested?” prompt need not be completed if the answer is “No.”*

|  |  |  |
| --- | --- | --- |
|  | **Current (Course Modifications Only)** | **Proposed (New or Modified)**  *(Indicate “N/A” if no modification)* |
| **Prefix** | **PSY** | **N/A** |
| **Number\*** | **7633** | **N/A** |
| **Title**  (include a short title that’s 30 characters or fewer) | Physiological Psychology and Psychopharmacology | **N/A** |
| **Description\*\*** | This course focuses on the interaction of biological structure and function with behavior and the role of endogenous chemicals in this interaction. The course addresses biological correlates associated with major mental disorders and exogenous chemical agents used in treatment. Permission of instructor required. | **N/A** |

***\**** Confirm with the Registrar’s Office that number chosen has not been used before and is available for use. For variable credit courses, indicate variable range. *Proposed number for experimental course is 9*.

\*\*Forty words or fewer (excepting prerequisites and other restrictions) as it should appear in the Bulletin.

1. **Proposed prerequisites and major restrictions** **[Modification requested? NO]**

(Indicate all prerequisites. If this course is restricted to a specific major, which major. If a student does not have the prerequisites or does not have the appropriate major, the student will not be allowed to register).

1. **Yes / No** Are there any prerequisites?
   1. If yes, which ones?

Enter text...

* 1. Why or why not?

Enter text...

1. **Yes / No** Is this course restricted to a specific major?
   1. If yes, which major? Enter text...
2. **Proposed course frequency [Modification requested? NO]**

(e.g. Fall, Spring, Summer; if irregularly offered, please indicate, “irregular.”) *Not applicable to Graduate courses.*

Not Applicable

1. **Proposed course type [Modification requested? NO]**

Will this course be lecture only, lab only, lecture and lab, activity (e.g., physical education), dissertation/thesis, capstone, independent study, internship/practicum, seminar, special topics, or studio? Please choose one.

Lecture Only

1. **Proposed grade type [Modification requested? NO]**

What is the grade type (i.e. standard letter, credit/no credit, pass/fail, no grade, developmental, or other [please elaborate])

Standard Letter

1. NO Is this course dual-listed (undergraduate/graduate)?
2. YES Is this course cross-listed?

*(If it is, all course entries must be identical including course descriptions. Submit appropriate documentation for requested changes. It is important to check the course description of an existing course when adding a new cross-listed course.)*

**a.** – If yes, please list the prefix and course number of the cross-listed course.

COUN 7633

**b.** – NO Can the cross-listed course be used to satisfy the prerequisite or degree requirements this course satisfies?

1. NO Is this course in support of a new program?

a. If yes, what program?

Enter text...

1. NO Will this course be a one-to-one equivalent to a deleted course or previous version of this course (please check with the Registrar if unsure)?

a. If yes, which course?

Enter text...

**Course Details**

1. **Proposed outline** **[Modification requested? NO]**

(The course outline should be topical by weeks and should be sufficient in detail to allow for judgment of the content of the course.)

1. **Proposed special features** **[Modification requested? NO]**

(e.g. labs, exhibits, site visitations, etc.)

N/A

1. **Department staffing and classroom/lab resources**
2. Will this require additional faculty, supplies, etc.?

1. NO Does this course require course fees?

*If yes: please attach the New Program Tuition and Fees form, which is available from the UCC website.*

**Justification**

**Modification Justification (Course Modifications Only)**

1. Justification for Modification(s)

The Council for the Accreditation of Counseling and Education Related Programs (CACREP) suggested the all courses within the clinical mental health counselor program have a prefix of COUN. The school psychology program also requires that their students take psychological testing. However, the school psychology students need a prefix of PSY while the clinical mental health counseling students need a prefix of COUN. Request to add COUN as a prefix and cross list the course.

**New Course Justification (New Courses Only)**

1. Justification for course. Must include:

b. How does the course fit with the mission of the department? If course is mandated by an accrediting or certifying agency, include the directive.

c. Student population served.

d. Rationale for the level of the course (lower, upper, or graduate).

**Assessment**

**Assessment Plan Modifications (Course Modifications Only)**

1. NO Do the proposed modifications result in a change to the assessment plan?

*If yes, please complete the Assessment section of the proposal*

**Relationship with Current Program-Level Assessment Process (Course modifications skip this section unless the answer to #18 is “Yes”)**

1. What is/are the intended program-level learning outcome/s for students enrolled in this course? Where will this course fit into an already existing program assessment process?

Enter text...

1. Considering the indicated program-level learning outcome/s (from question #19), please fill out the following table to show how and where this course fits into the program’s continuous improvement assessment process.

*For further assistance, please see the ‘Expanded Instructions’ document available on the UCC - Forms website for guidance, or contact the Office of Assessment at 870-972-2989.*

|  |  |
| --- | --- |
| **Program-Level Outcome 1 (from question #19)** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Assessment Measure | Please include direct and indirect assessment measure for outcome. |
| Assessment  Timetable | What semesters, and how often, is the outcome assessed? |
| Who is responsible for assessing and reporting on the results? | Who (person, position title, or internal committee) is responsible for assessing, evaluating, and analyzing results, and developing action plans? |

*(Repeat if this new course will support additional program-level outcomes)*

**Course-Level Outcomes**

1. What are the course-level outcomes for students enrolled in this course and the associated assessment measures?

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| --- | --- |
| **Outcome 1** | Type outcome here. What do you want students to think, know, or do when they have completed the course? |
| Which learning activities are responsible for this outcome? | List learning activities. |
| Assessment Measure | What will be your assessment measure for this outcome? |

*(Repeat if needed for additional outcomes)*

**Bulletin Changes**

|  |
| --- |
| **Instructions** |
| **Please visit** [**http://www.astate.edu/a/registrar/students/bulletins/index.dot**](http://www.astate.edu/a/registrar/students/bulletins/index.dot) **and select the most recent version of the bulletin. Copy and paste all bulletin pages this proposal affects below. Please include a before (with changed areas highlighted) and after of all affected sections.**  **\*Please note: Courses are often listed in multiple sections of the bulletin. To ensure that all affected sections have been located, please search the bulletin (ctrl+F) for the appropriate courses before submission of this form.** |

Page 103 (CURRENT):

**Psychology and Counseling**

**Specialist in Education**

**Clinical Mental Health Counseling Track**

|  |  |
| --- | --- |
| **University Requirements:** | |
| See Graduate Degree Policies for additional information (p. 47) | |
| **Program Requirements:** | **Sem. Hrs.** |
| COUN 6023, Introduction to Mental Health Counseling | 3 |
| COUN 6033, Social and Cultural Foundations of Counseling | 3 |
| COUN 6043, Career Development and Services | 3 |
| COUN 6053, Ethical, Legal, and Professional Issues in Counseling | 3 |
| COUN 6123, Group Counseling | 3 |
| COUN 6203, Counseling Prepracticum | 3 |
| COUN 6213, Counseling Practicum | 3 |
| COUN 6313, Alcohol and Drug Abuse | 3 |
| COUN 6432, Crisis, Disaster, and Trauma | 2 |
| COUN 6451, Telehealth for Mental Health Practice | 1 |
| COUN 7463, Introduction to Couples and Family Counseling | 3 |
| COUN 7473, Supervised Internship I | 3 |
| COUN 7493, Supervised Internship II | 3 |
| COUN 7633, Physiological Psychology and Psychopharmacology | 3 |
| PSY 6113 ~~,~~ Theories and Techniques in Helping Relationships | 3 |
| PSY 6231, Statistics and Research Design in Psychology and Counseling | 3 |
| PSY 6543, Psycho-Social Aspects of Development | 3 |
| PSY 6573, Psychological Testing | 3 |
| PSY 7223, Research Design and Program Evaluation in Psychology and Counseling | 3 |
| PSY 7533, Psychopathology | 3 |
| ~~PSY 7633, Physiological Psychology and Psychopharmacology~~ | ~~3~~ |
| Approved Elective | 3 |
| **Sub-total** | **60** |
| **Total Required Hours:** | **60** |

Page 154 (Current):

Clinical Mental Health Counseling

Graduate Certificate

|  |  |
| --- | --- |
| **University Requirements:** | |
| See Graduate Degree Policies for additional information (p. 47) | |
| **Core Courses:** | Sem. Hrs. |
| COUN 6023 Introduction to Clinical Mental Health Counseling | 3 |
| COUN 7463 Couples and Family Counseling | 3 |
| PSY 7533 Psychopathology | 3 |
| ~~PSY~~ COUN 7633 Physiological Psychology and Psychopharmacology | 3 |
| Sub-total | 12 |
| **Electives:** | Sem. Hrs. |
| Electives are selected from courses approved for credit in the Specialist in Education degree in Psychology and Counseling Clinical Mental Health Counseling track as approved by the academic advisor based upon a student’s individual needs and aspirations. | 3 |
| **Total Required Hours:** | 15 |

**NOTE: If a student has already received degree credit for courses named in the basic curriculum, the student’s academic advisor may modify that curriculum by substituting other courses ap­proved for credit in the Ed.S. degree in Psychology and Counseling (Clinical Mental Health Counseling track). Individual student needs may indicate the value of requiring more than 3 hours of elective coursework and clinical experiences, but the total submitted for the Certifi­cate in Clinical Health Counseling should not exceed 24 hours.**

Page 103 (AFTER):

**Psychology and Counseling**

**Specialist in Education**

**Clinical Mental Health Counseling Track**

|  |  |
| --- | --- |
| **University Requirements:** | |
| See Graduate Degree Policies for additional information (p. 47) | |
| **Program Requirements:** | **Sem. Hrs.** |
| COUN 6023, Introduction to Mental Health Counseling | 3 |
| COUN 6033, Social and Cultural Foundations of Counseling | 3 |
| COUN 6043, Career Development and Services | 3 |
| COUN 6053, Ethical, Legal, and Professional Issues in Counseling | 3 |
| COUN 6123, Group Counseling | 3 |
| COUN 6203, Counseling Prepracticum | 3 |
| COUN 6213, Counseling Practicum | 3 |
| COUN 6313, Alcohol and Drug Abuse | 3 |
| COUN 6432, Crisis, Disaster, and Trauma | 2 |
| COUN 6451, Telehealth for Mental Health Practice | 1 |
| COUN 7463, Introduction to Couples and Family Counseling | 3 |
| COUN 7473, Supervised Internship I | 3 |
| COUN 7493, Supervised Internship II | 3 |
| COUN 7633, Physiological Psychology and Psychopharmacology | 3 |
| PSY 6113 ~~,~~ Theories and Techniques in Helping Relationships | 3 |
| PSY 6231, Statistics and Research Design in Psychology and Counseling | 3 |
| PSY 6543, Psycho-Social Aspects of Development | 3 |
| PSY 6573, Psychological Testing | 3 |
| PSY 7223, Research Design and Program Evaluation in Psychology and Counseling | 3 |
| PSY 7533, Psychopathology | 3 |
| Approved Elective | 3 |
| **Sub-total** | **60** |
| **Total Required Hours:** | **60** |

Page 154 (Current):

Clinical Mental Health Counseling

Graduate Certificate

|  |  |
| --- | --- |
| **University Requirements:** | |
| See Graduate Degree Policies for additional information (p. 47) | |
| **Core Courses:** | Sem. Hrs. |
| COUN 6023 Introduction to Clinical Mental Health Counseling | 3 |
| COUN 7463 Couples and Family Counseling | 3 |
| PSY 7533 Psychopathology | 3 |
| COUN 7633 Physiological Psychology and Psychopharmacology | 3 |
| Sub-total | 12 |
| **Electives:** | Sem. Hrs. |
| Electives are selected from courses approved for credit in the Specialist in Education degree in Psychology and Counseling Clinical Mental Health Counseling track as approved by the academic advisor based upon a student’s individual needs and aspirations. | 3 |
| **Total Required Hours:** | 15 |

**NOTE: If a student has already received degree credit for courses named in the basic curriculum, the student’s academic advisor may modify that curriculum by substituting other courses ap­proved for credit in the Ed.S. degree in Psychology and Counseling (Clinical Mental Health Counseling track). Individual student needs may indicate the value of requiring more than 3 hours of elective coursework and clinical experiences, but the total submitted for the Certifi­cate in Clinical Health Counseling should not exceed 24 hours.**

Page 354 (INSERT):

**COUN 750V. Thesis**

**COUN 7633. Physiological Psychology and Psychopharmacology** This course focuses on the interaction of biological structure and function with behavior and the role of endogenous chem­icals in this interaction. The course addresses biological correlates associated with major mental disorders and exogenous chemical agents used in treatment. Prerequisite, instructor permission.

**COUN 780V. Independent Study** Advanced study of a specific topic or content in counseling not addressed in the curriculum. Student must submit a written proposal in advance that outlines the topic or content and expected products for evaluation. This proposal also requires written ap­proval of the professor and the department chair. This course is not intended to replace any course in the curriculum.