

CALIFORNIA STATE UNIVERSITY, EAST BAY  
**REQUEST FOR APPROVAL OF NEW CERTIFICATE,  
CREDENTIAL, OR SUBJECT MATTER PREPARATION PROGRAM IN \_\_\_\_\_**  
**[Type in name of Certificate, Credential, or Subject Matter Preparation Program  
As you want it to appear in the university catalog.]**

Quarter: **FALL** Year: \_\_\_\_\_ Catalog: \_\_\_\_\_ Date Submitted to APGS: \_\_\_\_\_  
*[First Quarter/Year of Offering] [Catalog in which the new Program will first appear]*

1. Department: \_\_\_\_\_  
*[Name of department or program which will offer the new  
Certificate, Credential, or Subject Matter Preparation Program.]*

2. Full and exact **title** of Certificate, Credential, or Subject Matter Preparation:

\_\_\_\_\_  
*[For example, Certificate in Creative Video; Multiple Subject Teaching Credential; Single Subject Matter  
Preparation Program in Mathematics.]*

3. **Purpose** of the proposed aggregate of courses: *[why does the department need this new Certificate,  
Credential, or Subject Matter Preparation Program? Will there be any effect on the other programs in  
your department as a result of this new Certificate, Credential, or Subject Matter Preparation Program?]*

4. List of all **requirements** including the **courses**, by catalog prefix number, title, and units of credit, as  
well as **total units** to be required under the proposed Certificate, Credential, or Subject Matter  
Preparation Program. [Show list as you want it to appear in the university catalog.]

**Total Units for Certificate/Credential/SMPP**

5. **Effects**, if any, on your department’s Program Learning Outcomes. [Will the addition of this new Certificate, Credential or Subject Matter Preparation Program result in any changes to your Program Learning Outcomes?]

--

6. List of **new courses** that were developed and existing **courses** that needed **modification** as a result of this new Certificate, Credential or SMPP, if any, submitted along with this proposal: *[Be sure to include all such course proposals and list in the following format:*  
*ABCD 1234, Introduction to Curriculum (4) – New*  
*EFGH 5678, Elementary Curriculum (3) – Modification (title, units)]*

<i>New Courses Developed</i>
<i>Existing Courses to be modified</i>

7. **RESOURCE IMPLICATIONS** of the proposed new Certificate, Credential or SMPP, if any: *[Include the need for student fees and other resources such as faculty, facilities, equipment, and library that will not be covered by the department budget. List all resources needed for the first five years beyond those currently projected, including specific resources, cost, and source of funding.]*

--

8. Relationship of proposed program to requirements for **teaching credentials, accreditation, and/or licensing.**

--

9. **CONSULTATION** with other affected departments and program committee:

a) The following **department(s)** has (have) been consulted and raise **no objections**:

*[If there were no objections to this curriculum request after listing it on the Curriculum Sharepoint site for five working days, type in the following: All Academic Departments and Programs at CSUEB were consulted using the Sharepoint Curriculum site and there were no objections.]*

b) The following **department(s)** has (have) been consulted and **raised concerns**:

*[If there were unresolved objections to this curriculum request after listing it on the Curriculum SharePoint site for five working days, indicate the objecting department or program below, along with the specific concern. If there were no unresolved objections, type in "None."]*

10. Certification of **DEPARTMENT APPROVAL** by the chair and faculty.

Chair: \_\_\_\_\_ Date: \_\_\_\_\_  
[Print Department chair's name here. Chair shall sign a hard copy for the College Office files.]

11. Certification of **COLLEGE APPROVAL** by the dean and college curriculum committee.

Dean/Associate Dean: \_\_\_\_\_ Date: \_\_\_\_\_  
[Print Dean or Associate Dean's name here. A hard copy shall be signed for the College Office files.]