The CSU Accessible Technology Initiative requires that all instructional materials be available in accessible formats. Departments will assure the instructional materials for the course will be accessible.
7. Is this course a requirement for a major that is a "similar" degree under the STAR Act (SB 1440)?  X  Yes  No
   [If Yes, explain how this modification will affect the "similar" degree agreement.]
   **THIS MAJOR IS APPROVED AS A "SIMILAR" DEGREE UNDER STAR ACT (SB 1440). ALTHOUGH THIS MODIFICATION MAKES CHANGES ON THE CONTENT AND FOCUS OF THE COURSE IT WILL NOT AFFECT THE "SIMILAR" DEGREE AGREEMENT.**

8. Does this modification affect this course’s Student Learning Outcomes (SLOs)?  Yes  X  No
   [List this course’s SLOs here and indicate where changes may have occurred.]
   Enter text here.

9. **RESOURCE IMPLICATIONS:** [With the modification of this course, is there a need for additional student fees or other resources such as faculty, facilities, equipment, and/or library resources that will not be covered by the department budget.]
   **THIS MODIFIES A CURRENT COURSE AND IS RESOURCES NEUTRAL.**

10. **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.]
      Enter text here.

   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."]
      Enter text here.

11. Certification of **DEPARTMENT APPROVAL** by the chair and faculty.
    Chair:  Gale Young, Ph.D.  Date: 5/23/2014
    [Print name of Department Chair here. Chair shall sign a hard copy for the College Office files.]

12. Certification of **COLLEGE APPROVAL** by the dean and college curriculum committee.
    Dean/Associate Dean:  Date:  
    [Print name of Dean or Associate Dean here. A hard copy shall be signed for the College Office files.]