GRADUATE COUNCIL PROPOSAL FOR CHANGE IN EXISTING COURSE/PROGRAM

ORIGINATING UNIT: Psychology

TYPE OF ACTION:

	Change in existing course
X	Change in existing program

TYPE OF CHANGE REQUESTED:

	Number
	Title
	Description
	Pre-requisite(s)
	Drop course/program
X	Program requirements
	Other (specify):

Current CIP Code (programs only):

Does the change require a new or change in CIP Code: No

If yes, what is the proposed new CIP code?

*for reference please visit: <u>https://nces.ed.gov/ipeds/cipcode/resources.aspx?y=56</u>

Semester and year change(s) takes effect: Fall 2020

Is the program already considered TCU STEM? Yes

Does the change include a request to be a TCU STEM program? No

Appropriate Computer Abbreviation (30 spaces or less): Graduate Quantitative Psychology Minor

<u>Description of Change (i.e., highlight</u>, bold, *italics*, or otherwise identify parts that are changed in proposed copy (omit if dropping a course or program):

Present catalog copy:

Requirements

Required Courses (6 semester hours) PSYC 50523 Experimental Design PSYC 60623 Regression Analysis	3 3
Electives (9 hours) PSYC 50213 Interactive Data Analysis PSYC 60633 Generalized Linear Models PSYC 60643 Structural Equation Models PSYC 60653 Multilevel/Hierarchical Models PSYC 60673 Advanced Structural Equation Modeling PSYC 60743 Longitudinal Data Analysis	3 3 3 3 3 3
Proposed catalog copy:	
Requirements	
Required Courses (6 semester hours) PSYC 50523 Analysis of Variance Experimental Design PSYC 60623 Regression Analysis	3 3
Electives (9 hours) PSYC 50213 Interactive Data Analysis PSYC 60633 Generalized Linear Models PSYC 60643 Structural Equation Models PSYC 60653 Multilevel/Hierarchical Models PSYC 60673 Advanced Structural Equation Modeling	3 3 3 3 3

<u>Supporting Evidence of Justification</u>: The change is a better reflection of course the content.

Explain how the change(s) will affect the current outcomes and assessment mechanisms?

The change in course title should not influence current outcomes and assessments.

Additional Resources Required:

Faculty: Not applicable (N/A) Space: N/A Equipment: N/A Library: N/A Other: N/A

Change in teaching load:

Does this change affect any other units of the University? No If yes, submit supporting statement signed by chair of affected unit.

If cross-listed, provide evidence of approval by all curriculum committees appropriate to both the originating and the cross-listed units.

	N P	
Signature:	AL-	_

<u>Chair of Originating Unit</u>:

 Name:___Anna Petursdottir_____

 Unit:___Psychology_____

Revised 12/2019