DO NOT TYPE IN THIS BOX

Bulletin # : _____

Academic Year : _____

FLORIDA INTERNATIONAL UNIVERSITY
UNIVERSITY CURRICULUM COMMITTEE
Proposal for a New Course

1. **School/College** Engineering and Computing

   Div./Dept. in Which Taught School of Computing and Information Systems

2. IDC | 4 | | C | 4 — **CIP Code** *(Leave this blank):* _____

   Alpha Prefix | 1st Digit | Last 3 Digits | "C"-lec-lab "L"-Lab | Cr. Hrs.

3. **Grading Method (select one):** ☒ Graded ☐ Pass/Fail

4a. **Course Title** Computer Science Education for Elementary School Children

b. **Abbreviated course Title** *(for computer class schedules, transcripts)* CS Ed for Elementary

LIMITED TO 25 Characters *(including spaces)*

5. **Statewide Course Numbering Subject Matter Area** IDC- 4xxx Interdisciplinary Computing

6. **Catalog Description/Major Topics** *(not to exceed 200 characters including spaces)*

College of Medicine and College of Law: Attach description not exceeding 1,000 characters including spaces.

Provide teachers with the knowledge of **introductory** Computer Science topics, as well as the pedagogy on how to teach the topics. Computer Science topics include computational thinking, logic, visual programming, and social issues related to computer technologies including Internet safety.

7. **Attach detailed syllabus course outline and course justification on separate page(s).**
8. **Prerequisite(s):** N/A
9. **Corequisite(s):** N/A
10. **Objective(s) of Course:**

Provide teachers with the knowledge, practice, and an feedback on effectively teaching computational thinking to elementary school students, using a K-5 curriculum that has been vetted for years.

11. **Does this course duplicate/overlap other courses at FIU?** ☒ No ☐ Yes

    If yes, please explain: _____

12. **What other closely related department(s) have been consulted about this course?**

    School of Education

13. **Is this course used for the assessment of a program or a certificate (if yes, then send a notification to assessment@fiu.edu)?** **No** **Yes**

PROPOSAL REQUESTED BY:

Faculty Contact Cristy Charters — 10 / 23 / 20 17

(Type name) (Signature)

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(Email address) (Phone number)

Chairperson (Dept./Div.) Dr. Mark Weiss — ____ / ____ / 20____

(Type name) (Signature)

Chairperson (Curr. Comm.) _____ — ____ / ____ / 20____

(Type name) (Signature)

College/School Dean Dr. John Volakis — ____ / ____ / 20____

(Type name) (Signature)

Submit one original form. Attach one copy of the course justification and course syllabus, course description, objectives, major topics and textbooks.