UC 8966 06F

CBM003 ADD/CHANGE FORM

		Undergraduate Council New Course Course Change Or Graduate/Professional Studies Council New Course Course Change Description or Effective Fall 2007	
,	1.	Department: Clinical and Administrative Sciences College: PHAR RECEIVED OCT 0 3 2006	
PH PI	2. 3. وع	Person Submitting Form: Rajender Aparasu Telephone: 713-795-8374 Course Information on New/Revised course: Instructional Area / Course Number / Long Course Title: PHSC / 4200 / PHARMACOEPIDEMIOLOGY APPROVED JAN 2 4 2	:007
	+ P.S	 Instructional Area / Course Number / Short Course Title (30 characters max.) PHSC / 4200 / PHARMACOEPIDEMIOLOGY SCH: 2.00 Level: SR CIP Code: Lect Hrs: 2 Lab Hrs: 0 	
	4.	Justification for adding/changing course: To provide for new discipline areas	
	5.	Was the proposed/revised course previously offered as a special topics course? Yes No If Yes, please complete: Instructional Area / Course Number / Long Course Title: //	
		• Content ID: Start Date (yyyy3):	
	6.	Is this course offered for undergraduate credit only? X Yes No	
	7.	Authorized Degree Program(s): <u>BS in Pharmaceutical Sciences</u> • Does this course affect major/minor requirements in the College/Department?	
	8.	Grade Option: <u>Letter (A, B, C)</u> Instruction Type: <u>lecture</u>	
	9.	If this form involves a change to an existing course, please obtain the following information from the course inventory: Instructional Area / Course Number / Long Course Title// • Start Date (yyyy3): Content I.D.:	
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	10.	Proposed Catalog Description: (If there are no prerequisites, type in "none".) Cr. 2 (2-0). Prerequisites: Co-requisite: PHSC 4300. Description (30 words max.): Epidemiological concepts and its aplication to pharmaceutial sciences.	
	11.	Dean's Signature: Date: 9/7/0	5
		Print/Type Name: Dean Sunny E. Ohia, Ph.D.	