CBM003 ADD/CHANGE FORM

[Check Box] Undergraduate Council
☐ New Course ☒ Course Change
Core Category: NONE Effective Fall 2011

☐ Graduate/Professional Studies Council
☐ New Course ☐ Course Change
Effective Fall ___

1. Department: Health and Human Performance College: CLASS
2. Faculty Contact Person: Sharon Bode Telephone: 34112 Email: sbode@uh.edu
3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     NUTR / 3101 / Dietetics as a Profession
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     NUTR / 3101 / DIETETICS AS A PROFESSION
   - SCH: 1.00 Level: JR CIP Code: 19.0501.00.07 Lect Hrs: 1 Lab Hrs: 0
4. Justification for adding/changing course: To reflect change in prerequisite course
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:
     _____ / _____ / _____
   - Course ID: _____ Effective Date (currently active row): _____
6. Authorized Degree Program(s): B.S. Human Nutrition and Foods
   - Does this course affect major/minor requirements in the College/Department? ☐ Yes ☒ No
   - Does this course affect major/minor requirements in other Colleges/Departments? ☐ Yes ☒ No
   - Can the course be repeated for credit? ☐ Yes ☒ No (if yes, include in course description)
7. Grade Option: Letter (A, B, C...) Instruction Type: lecture ONLY (Note: Lect/Lab info. must match item 3, above.)
8. 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
   NUTR / 3101 / Dietetics as a Profession
   - Course ID: 35365 Effective Date (currently active row): 08/23/2004
9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr: 1. (1-0). Prerequisites: Declared major in nutrition. Description (30 words max.): Overview of
   dietetics profession, including the development of a professional portfolio, career options in dietetics, and
   application to post-baccalaureate programs.

t
10. Dean's Signature: ______________________ Date: 9/24/10
    Print/Type Name: Dr. Sarah Fishman