CBM003 ADD/CHANGE FORM

1. Department: HRMA  College: HRM
2. Faculty Contact Person: Jeremy L. Dafoe  Telephone: 713-743-3740  Email: jdafoe@uh.edu
3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     HRMA / 1345 / Safety and Sanitation in the Hospitality Industry
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     HRMA / 1345 / SAFETY/SANITATION IN HOSP IND
   - SCH: 3.00  Level: FR  CIP Code: 5219090016  Lect Hrs: 3  Lab Hrs: 0
4. Justification for adding/changing course: To more accurately reflect course content/level
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., Hotel & Restaurant Management
   - 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
   HRMA / 1345 / Safety, Sanitation & Security in the Hospitality Industry
   - Course ID: 27091  Effective Date (currently active row): 8/05
9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr: 3. (3-0). Prerequisites: None  Description (30 words max.): Integration of safety and sanitation using Hazard Analysis Critical Control Point (HACCP) as the model for implementation of strategies to maintain and enhance the profit potential in hospitality operation. Sanitation certification requirement.
10. Dean’s Signature: ________________________________ Date: 10/7/10
    Print/Type Name: Dr. Carl Boger, Jr.