CBM003 ADD/CHANGE FORM

Undergraduate Council ☒  New Course ☒  Course Change ☒
Core Category: ______ Effective Fall 2011

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

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 / 4362 / Mgt Training Work Exper. II
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     HRMA / 4362 / MGT TRAINING WORK EXPER. II
   - SCH: 3.00  Level: SR  CIP Code: 5219020016  Lect Hrs: 3  Lab Hrs: 0

4. Justification for adding/changing course: To reflect appropriate grade option

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: S/U (satisfactory/unsatisfactory)  Instruction Type: practicum  (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 / 4362 / Mgt Training Work Experience I
   - Course ID: 27307  Effective Date (currently active row): 8/03

9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr: 3. (3-0). Prerequisites: Junior standing and consent of instructor. Description (30 words max.):
   Analysis of a hospitality establishment from a managerial perspective while student is employed at the
   establishment.

10. Dean’s Signature: ___________________________  Date: 10/21/10

Print/Type Name: Dr. Carl Boger, Jr.