

CBM003 ADD/CHANGE FORM

APPROVED DEC 08 2010

Undergraduate Council
 New Course Course Change *2611*
 Core Category: _____ Effective Fall 2010

or

Graduate/Professional Studies Council
 New Course Course Change
 Effective Fall __

1. Department: Information & Logistics Technology College: TECH
2. Faculty Contact Person: Michael Gibson Telephone: 713-743-5116 Email: mlgibson@uh.edu
3. Course Information on New/Revised course:

- Instructional Area / Course Number / Long Course Title:
SCLT / 4397 / Selected Topics In Supply Chain and Logistics Technology
- Instructional Area / Course Number / Short Course Title (30 characters max.)
SCLT / 4397 / SELECTED TOPICS SUPPLY CHAIN
- SCH: 3.0 Level: SR CIP Code: 52.0203.00 16 Lect Hrs: 3 Lab Hrs: 0

RECEIVED OCT 15 2010

4. Justification for adding/changing course: To identify major or minor program *(title change)*
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): TELSBS, CETEBS, MEETBS, EPETBS, ISTEBS, SCLTBS, CMTBS, CMTSMBS, BIOTECHBS

- 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
LOGT / 4397 / Selected Topics in Logistics Technology

- Course ID: 30343 Effective Date (currently active row): 2008

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
Cr: 3. (3-0). Prerequisites: Approval of department chair. Description (30 words max.): May be repeated for credit when topics vary.

10. Dean's Signature: [Signature] Date: 10/14/10

Print/Type Name: Fred Lewallen, Associate Dean for Academic Affairs