

UC 11051 10F

CBM003 ADD/CHANGE FORM

APPROVED FEB 23 2011

Undergraduate Council  
 New Course  Course Change  
Core Category: \_\_\_\_\_ Effective Fall 2011

or  
Graduate/Professional Studies Council  
 New Course  Course Change  
Effective Fall 2011

1. Department: \_\_\_\_\_ College: ARCH  
2. Faculty Contact Person: Lannis Kirkland Telephone: 3-2363 Email: lkirkland@uh.edu

3. Course Information on New/Revised course:  
• Instructional Area / Course Number / Long Course Title:  
INDS / 4180 / Design Internship  
• Instructional Area / Course Number / Short Course Title (30 characters max.)  
INDS / 4180 / DESIGN INTERNSHIP  
• SCH: 1.00 Level: SR CIP Code: 5004040003 Lect Hrs: 0 Lab Hrs: 0

RECEIVED OCT 15 2010

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): BS Industrial Design  
• 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: 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  
INDS / 4180 / Design Internship  
• Course ID: 28337 Effective Date (currently active row): 8202007

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)  
Cr: 1. (1-0) Prerequisites: INDS 3501 and prior written approval from the dean. Description (30 words max.): Application of design knowledge and techniques through work experience at design consultancies or related companies. Requires employer evaluation.

10. Dean's Signature: FOR PBO \_\_\_\_\_ Date: 10.15.10

Print/Type Name: Patricia Belton Oliver