

CBM003 ADD/CHANGE FORM

APPROVED MAR 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: COMM College: CLASS
2. Faculty Contact Person: Julie B. Fix Telephone: 3-3828 Email: jbfix@central.uh.edu
3. Course Information on New/Revised course:
 - Instructional Area / Course Number / Long Course Title:
COMM / 4360 / Media Planning and Placement
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
COMM / 4360 / MEDIA PLANNING AND PLACEMENT
 - SCH: 3.00 Level: SR CIP Code: 09.0903.00.01 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.A.
 - 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
COMM / 4360 / Media Planning and Placement
 - Course ID: 16558 Effective Date (currently active row): 8/25/2003
9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
Cr: 3. (3-0). Prerequisites: COMM 3360 or COMM 3368 or consent of instructor. Description (30 words max.): Application of media planning principles to create an integrated communications plan.
10. Dean's Signature: _____ Date: 10/14/10
Print/Type Name: Sarah Fishman

RECEIVED OCT 15 2010