UC 11999 12F

CBM003 ADD/CHANGE FORM APPROXE		APPROVED DEC 0 5 2012
☐ Undergraduate Council	or	Graduate/Professional Studies Council
☐ New Course		☐ New Course ☐ Course Change Effective Fall 2013
Land the state of		
1. Department: Accounting and Taxation Co	ollege: <u>BUS</u>	
2. Faculty Contact Person: <u>Joaquin Diaz-Saiz</u>	Telephone	e: 34713 Email: jdiaz-saiz@uh.edu
 Course Information on New/Revised course Instructional Area / Course Number / Lo ACCT / 4396 / Accounting Internship 		ritle: RECEVED OCT 1 1 2012
 Instructional Area / Course Number / Shacct / 4396 / ACCOUNTING INTERIT 	NSHIP	/
• SCH: <u>3.00</u> Level: <u>JR</u> CIP Code: <u>5203</u>	<u>3010016</u> L	Lect Hrs: 2 Lab Hrs: 2
4. Justification for adding/changing course: <u>To</u>		School State Control of the Control
5. Was the proposed/revised course previously	y offered as	a special topics course? Yes No
If Yes, please complete:		
 Instructional Area / Course Number / Lo 	ong Course	Γitle:
/		
Course ID: Effective Date (current)	rently active	e row):
6. Authorized Degree Program(s): <u>BBA</u>		
		the College/Department? Yes No
		n other Colleges/Departments?
 Can the course be repeated for credit? 	∐ Yes	No (if yes, include in course description)
7. Grade Option: <u>IS (satisfactory/unsatisfactory practicum, cooperative education</u> (Note	ry/incomple :: Lect/Lab i	ete) Instruction Type: info. must match item 3, above.)
8. If this form involves a change to an existing	g course, ple	ease obtain the following information from
the course inventory: Instructional Area / C	Course Num	iber / Long Course Title
ACCT / 4341 / Accounting Internship		
• Course ID: <u>10058</u> Effective Date	(currently a	active row): <u>8241998</u>
9. Proposed Catalog Description: (If there are	no prerequi	isites, type in "none".)
Cr: 3. Prerequisites: Prerequisites: j	unior standi	ing and prior written approval of the program
director. Description (30 words max.): Er		
		the auditing or accounting profession. (Internship
credit is limited to three credit hours and re	quires empl	oyer evaluation.)
10. Dean's Signature:		Date: 10-10-12

Print/Type Name: Teri Elkins Longacre