UC 12425 13F APPROVED APR 2 3 2014

## CBM003 ADD/CHANGE FORM

<u> </u>	Undergraducte Council	or	Graduate/Professional Studies Council
	Undergraduate Council		
	New Course Course Change		New Course Change
Core Category: NONE Effective Fall 2014 Effective Fall 2013			
1.	Department: <u>Health and Human Performance</u>	College	
2.	Faculty Contact Person: <u>Jessica Wheeler</u> Tele	ephone: <u>3</u>	9852 Email: jwheeler5@uh.edu
3.	Course Information on New/Revised course:  • Instructional Area / Course Number / Long Course Title:  PEB / 1115 / Aerial Arts and Fitness		
	<ul> <li>Instructional Area / Course Number / Short Course Title (30 characters max.)</li> <li>PEB / 1115 / AERIAL ARTS AND FITNESS</li> </ul>		
	• SCH: <u>1.00</u> Level: <u>FR</u> CIP Code: <u>36.010</u>	8.00 13	Lect Hrs: 0 Lab Hrs: 3
4.	Justification for adding/changing course: To incorporate new developments in discipline		
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 T	itle:
	/		
	Course ID: Effective Date (current)	tly active	row):
6.	Authorized Degree Program(s):		
	• Does this course affect major/minor require	ments in	the College/Department?
	• Does this course affect major/minor require	ements in	other Colleges/Departments?
	• Can the course be repeated for credit?	Yes Yes	No (if yes, include in course description)
7.	Grade Option: <u>MU (multiple types)</u> Instrumust match item 3, above.)	ction Ty	pe: <u>laboratory ONLY</u> (Note: Lect/Lab info.
8.	If this form involves a change to an existing co	ourse, ple	ase obtain the following information from
	the course inventory: Instructional Area / Cou	_	
	//		_
	Course ID: Effective Date (current)	ly active	row)
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9.	Proposed Catalog Description: (If there are no prerequisites, type in "none".)  Cr. 1. (0-3). Prerequisites: none. Description (30 words max.): Hands on instruction for developing fitness for climbs and poses using aerial silk fabrics.		
10.	Dean's Signature:		Date: 10 / 1/1/2
	Print/Type Name: Sarah Fishman		/ /