UC 8904 06F

CBM003 ADD/CHANGE FORM

☒ Undergraduate Council	**or** ☐ Graduate/Professional Studies Council
☒ New Course ☐ Course Change	☐ New Course ☐ Course Change
Core Category: _____ Effective Fall **2007**	Effective Fall __

1. Department: <u>Clinical Sciences & Administration</u>   College: PHAR   · **RECEIVED** OCT 0 3 2006

2. Person Submitting Form: <u>Rajender Aparasu/Shara Zatopek</u>   Telephone: <u>713-795-8374</u>

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title: **APPROVED FEB 2 1 2007**

   PHPS ~~PHSC~~ / 3201 / ~~Introduction to~~ Community Health

   ∨ *Pharmaceutical Services and*

   - Instructional Area / Course Number / Short Course Title (30 characters max.)

   PHPS ~~PHCS~~ / 3201 / ~~COMMUNITY HEALTH~~ *PHARM SERV AND COMM HEALTH*

   - SCH: <u>2.00</u>   Level: <u>JR</u>   CIP Code: _____   Lect Hrs: <u>2</u>   Lab Hrs: <u>0</u>

4. Justification for adding/changing course: **To provide for new discipline areas**

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:

   ____ / ____ / _____

   - Content ID: _____   Start Date (yyyy3): _____

6. Is this course offered for undergraduate credit only? ☒ Yes ☐ No

7. Authorized Degree Program(s): _____
   - 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
   - Are special fees attached to this course?   ☒ Yes ☐ No
   - Can the course be repeated for credit?   ☐ Yes ☒ No

8. Grade Option: <u>Letter (A, B, C ...)</u>   Instruction Type: <u>lecture</u>

9. 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

   ____ / ____ / _____

   - Start Date (yyyy3): _____   Content I.D.: _____

10. Proposed Catalog Description:
    Cr: (2-0). Prerequisites: None   Description (30 words max.): ~~Introduction to~~ public health concepts and ~~its~~ *Their*
    application to pharmaceutical products and services.

11. Dean's Signature: ████████████████████████   Date: <u>9/28/06</u>

    Print/Type Name: <u>Sunny E. Ohia, Ph.D.</u>