

CBM003 ADD/CHANGE FORM

Undergraduate Council
 New Course Course Change
 Core Category: _____ Effective Fall 2007

or

Graduate/Professional Studies Council
 New Course Course Change
 Effective Fall __

RECEIVED OCT 03 2006

APPROVED JAN 24 2007

- Department: PPS College: PHAR
- Person Submitting Form: Kelly Standifer/Shara Zatopek Telephone: 3-1771/3-1262
- Course Information on New/Revised course:
 - Instructional Area / Course Number / Long Course Title:
^{P+PS} PHSC / 3398 / Special Problems in Pharmaceutical Sciences
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
^{P+PS} PHSC / 3398 / SP PROB IN PHARMACEUTICAL SCI.
 - SCH: 3 Level: JR CIP Code: _____ Lect Hrs: 3 Lab Hrs: 0
- Justification for adding/changing course: To provide for new discipline areas
- 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): _____
- Is this course offered for undergraduate credit only? Yes No
- Authorized Degree Program(s): B.S. Pharmaceutical Sciences
 - 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
- Grade Option: S/U (satisfactory/unsatisfactory) Instruction Type: independent study
- 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.: _____
- Proposed Catalog Description: (If there are no prerequisites, type in "none".)
 Cr: 3 (3) Prerequisites: Junior standing in PHSC and permission of dept chair or designate. Description (30 words max.): Supervised research experience in pharmaceutical sciences.
- Dean's Signature: _____ Date: 9/28/06
 Print/Type Name: Sunny E. Ohia, Ph.D.