

## 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 \_\_

1. Department: PPS College: PHAR

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2. Person Submitting Form: Kelly Standifer/Shara Zatopek Telephone: 3-1771/3-1262

3. Course Information on New/Revised course:

APPROVED JAN 2 4 2007

*PHPS* • Instructional Area / Course Number / Long Course Title:  
PHSC / 4398 / Special Problems in Pharmaceutical Sciences

*PHPS* • Instructional Area / Course Number / Short Course Title (30 characters max.)  
PHSC / 4398 / SP PROB IN PHARMACEUTICAL SCI.

• SCH: 3 Level: SR CIP Code: \_\_\_\_\_ Lect Hrs: 3 Lab Hrs: 0

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): 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

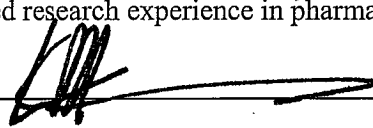
8. Grade Option: S/U (satisfactory/unsatisfactory) Instruction Type: independent study

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: (If there are no prerequisites, type in "none".)

Cr: 3 (3) Prerequisites: <sup>S</sup>Senior standing in PHSC <sup>and permission</sup> approval of dept chair or designate. Description (30 words max.): <sup>A</sup>Supervised research experience in pharmaceutical sciences.

11. Dean's Signature:  Date: 9/7/06

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