

## CBM003 ADD/CHANGE FORM

<input checked="" type="checkbox"/> Undergraduate Council <input checked="" type="checkbox"/> New Course <input type="checkbox"/> Course Change <i>2608</i> Core Category: <u>DNUS</u> Effective Fall: <u>2007</u>	or	<input type="checkbox"/> Graduate/Professional Studies Council <input type="checkbox"/> New Course <input type="checkbox"/> Course Change Effective Fall: <u>    </u>
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1. Department: Communication   College: CLASS
2. Person Submitting Form: Jim Query, Ph.D.   Telephone: 3-8608
3. Course Information on New/Revised course:
  - Instructional Area / Course Number / Long Course Title:  
COMM / 3304 / Multicultural Health Communication
  - Instructional Area / Course Number / Short Course Title (30 characters max.)  
COMM / 3304 / MULTICULTURAL HEALTH COMM
  - SCH: 3.00   Level: JR   CIP Code: 0909050001   Lect Hrs: 3   Lab Hrs: 0


RECEIVED OCT 23 2006  
 APPROVED MAR 12 2008

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): BA/COM-HC
  - 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: Letter (A, B, C ...)   Instruction Type: lecture
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: *or consent of instructor*  
 Cr: (3-0)   Prerequisites: *3300*   Description (30 words max.): *Examines diverse ethnic meaning systems and their influences on health behaviors.*

11. Dean's Signature:  \_\_\_\_\_ Date: 10/18/06  
 Print/Type Name: Dr. Sarah Fishman-Boyd