

CBM003 ADD/CHANGE FORM

<input checked="" type="checkbox"/> Undergraduate Council
<input type="checkbox"/> New Course <input checked="" type="checkbox"/> Course Change <u>2009</u>
Core Category: <u>NONE</u> Effective Fall <u>2008</u>

or

<input type="checkbox"/> Graduate/Professional Studies Council
<input type="checkbox"/> New Course <input type="checkbox"/> Course Change
Effective Fall <u> </u>

1. Department: DISC College: BUS
2. Person Submitting Form: Mary Gould Telephone: 34904
3. Course Information on New/Revised course:
 - Instructional Area / Course Number / Long Course Title:
SCM / 4369 / Supply Chain Management Internship
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
SCM / 4369 / SUPPLY CHAIN MGT INTERNSHIP
 - SCH: 3.00 Level: SR CIP Code: 5202050016 Lect Hrs: 0 Lab Hrs: 0
4. Justification for adding/changing course: **To reflect appropriate grade option**
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. Authorized Degree Program(s): BBA
 - 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
7. Grade Option: IS (satisfactory/unsatisfactory/incomplete) Instruction Type:
practicum, cooperative education (Note: Lect/Lab info. must match item 3, above.)
8. 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
DISC / 4369 / Supply Chain Management Internship
 - Start Date (yyyy3): 20043 Content I.D.: 295075
9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
Cr: 3. (0-0). Prerequisites: SCM 3301, credit for or concurrent enrollment in SCM 4361, and approval of area coordinator. Description (30 words max.): Practicum in manufacturing or distribution management.
10. Dean's Signature: Latha Ramchand Date: 6/17/08

Print/Type Name: Latha Ramchand, Associate Dean

RECEIVED JUN 23 2008