

CBM003 ADD/CHANGE FORM

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

or

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

RECEIVED OCT 17 2008

1. Department: PPS College: PHAR
 2. Faculty Contact Person: Catherine Hatfield Telephone: 3-4292 Email: chatfield@uh.edu
 3. Course Information on New/Revised course:
 - Instructional Area / Course Number / Long Course Title:
PHPS / 3293 / Senior Research Project
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
PHPS / 3293 / SENIOR RESEARCH PROJECT
 - SCH: 2.0 Level: JR CIP Code: 51.2099.01 Lect Hrs: 0 Lab Hrs: 3
 4. Justification for adding/changing course: To delete course from inventory
 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:
 / /
 - Course ID: Effective Date (currently active row):
 6. 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
 - Can the course be repeated for credit? Yes No (if yes, include in course description)
 7. Grade Option: S/U (satisfactory/unsatisfactory) Instruction Type: independent study (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
PHPS / 3293 / Senior Research Project
 - Course ID: 038832 Effective Date (currently active row): 8/20/07
 9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
Cr: 2. (0-6). Prerequisites: S/R Permission of departmental chair or designate. Description (30 words max.):
Directed research culminating in a departmentally approved report.
 10. Dean's Signature: _____ Date: 10/14/08
- Print/Type Name: Dean Mustafa F. Lokhandwala, Ph.D.