UC 10436 09F APPROYED DEC: 0 9 2009

CBM003 ADD/CHANGE FORM

☐ Undergraduate Council		or	Graduate/Professional Studies Council
☐ New Course ☐ Course Change			☐ New Course ☐ Course Change
Core Category: NONE Effective Fall 2010			Effective Fall
1.	Department: ART College: CLASS		RECENTED OCT 0 9 2009
2.	2. Faculty Contact Person: Pat Deeves Telephone: 30936 Email: pdeeves@uh.edu		
3.	 Course Information on New/Revised course: Instructional Area / Course Number / Long Course Title: <u>ART</u> / <u>3327</u> / <u>Junior Interior Design Major</u> 		
	• Instructional Area / Course Number / Short / /		
	• SCH: <u>3.00</u> Level: <u>JR</u> CIP Code:	Lect Hr	s: <u>0</u> Lab Hrs: <u>6</u>
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 T	itle:
	//		
	Course ID: Effective Date (current)	ly active	row):
6.	Authorized Degree Program(s):		
			the College/Department?
	•		other Colleges/Departments? Yes No
	• Can the course be repeated for credit?	Yes Yes	No (if yes, include in course description)
7.	Grade Option: Instruction Type:	(Note:	: Lect/Lab info. must match item 3, above.)
8.	If this form involves a change to an existing course inventory: Instructional Area / Cour//		
	Course ID: Effective Date (current)	y active r	row):
9.	Proposed Catalog Description: (If there are no particles of the control of the control of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If there are no particles of the catalog Description: (If the catalog Description of the catalog Description) (If the catalog Description of the catalog Descriptio		ites, type in "none".) words max.):
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10.	Dean's Signature:		Date: <u>/0/</u> 5/09
	Print/Type Name: Sarah Fishman		1

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