

UC 1123810F

CBM003 ADD/CHANGE FORM

APPROVED MAR 23 2011

Undergraduate Council
 New Course Course Change
Core Category: _____ Effective Fall 2011

or

Graduate/Professional Studies Council
 New Course Course Change
Effective Fall 2011

1. Department: COMM College: CLASS

2. Faculty Contact Person: Julie B. Fix Telephone: 3-3728 Email: jbfix@central.uh.edu

3. Course Information on New/Revised course:

• Instructional Area / Course Number / Long Course Title:
COMM / 3340 / Health Campaigns

RECEIVED OCT 15 2010

• Instructional Area / Course Number / Short Course Title (30 characters max.)
COMM / 3340 / HEALTH CAMPAIGNS

• SCH: 3.00 Level: JR CIP Code: 09.0905.00.01 Lect Hrs: 3 Lab Hrs: 0

4. Justification for adding/changing course: To more accurately reflect course content/level (title Δ)

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.A.

- 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: Letter (A, B, C ...) Instruction Type: lecture ONLY (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
COMM / 3340 / Health Campaign Principles and Tailored Messages

• Course ID: 45575 Effective Date (currently active row): 8252008

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)

Cr: 3. (3-0). Prerequisites: COMM 3300 or consent of instructor. Description (30 words max.):
Selected health campaign exemplars and mass customization of multimedia messages to identified segments.

10. Dean's Signature: _____ Date: 10/19/10

Print/Type Name: Sarah Fishman