

UC 1156711F

CBM003 ADD/CHANGE FORM

APPROVED FEB 22 2012

Undergraduate Council
 New Course Course Change
 Core Category: NONE Effective Fall 2012

or

Graduate/Professional Studies Council
 New Course Course Change
 Effective Fall 2012

1. Department: ASLI College: CLASS
 2. Faculty Contact Person: Sharon G. Hill Telephone: 713-743-2897 Email: shill@uh.edu

3. Course Information on New/Revised course:
 • Instructional Area / Course Number / Long Course Title:
ASLI / 4489 / Service Learning - Fieldwork
 • Instructional Area / Course Number / Short Course Title (30 characters max.)
ASLI / 4489 / SERVICE LEARNING - FIELDWORK
 • SCH: 3.00 Level: SR CIP Code: 16.1603 Lect Hrs: 2 Lab Hrs: 1

RECEIVED OCT 14 2011

4. Justification for adding/changing course: To meet instructional needs of students
 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., American Sign Language Interpreting
 • 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 laboratory (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
ASLI / 4489 / Internship
 • Course ID: 46289 Effective Date (currently active row): 8242009

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
 Cr: 3. (2-1). Prerequisites: ASLI major, 3334 and 4346. Description (30 words max.): Practical experience in a variety of settings that provide interpreting and/or language processing skill development. Professionalism, ethical behavior and client protocol will be considered. (May be repeated multiple times)

10. Dean's Signature: _____ Date: 10/11/11

Print/Type Name: Sarah Fishman