

UC 860305F

CBM003 ADD/CHANGE FORM

Undergraduate Council  
 New Course  Course Change  
 Core Category: \_\_\_\_\_ Effective Fall 2006

or  Graduate/Professional Studies Council  
 New Course  Course Change  
 Effective Fall \_\_\_\_\_

1. Department: Thea College: CLASS
2. Person Submitting Form: Middents Telephone: 3-2914
3. Course Information on New/Revised course:
  - Instructional Area / Course Number / Long Course Title:  
THEA / 4343 / Sound Design In Production
  - Instructional Area / Course Number / Short Course Title (30 characters max.)  
THEA / 4343 / SOUND DESIGN IN PRODUCTION
  - SCH: 3.00 Level: SR CIP Code: 5005020003 Lect Hrs: 3.0 Lab Hrs: 0
4. Justification for adding/changing course: To provide for important discipline area

RECEIVED OCT 05 2005  
 APPROVED NOV 16 2005

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. Is this course offered for undergraduate credit only?  Yes  No

7. Authorized Degree Program(s): BA
  - 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

8. Grade Option: Letter (A, B, C...) Instruction Type: practicum

9. 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  
 \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_
  - Start Date (yyyy3): \_\_\_\_\_ Content I.D.: \_\_\_\_\_

10. Proposed Catalog Description:  
 Cr: ~~(3.0)~~<sup>3</sup> Prerequisites: THEA3386 or consent of instructor. Description (30 words max.): Practical work as a sound designer on a production in the School of Theatre.

11. Dean's Signature: [Signature] Date: 9/5/05  
 Print/Type Name: \_\_\_\_\_