

CBM003 ADD/CHANGE FORM

Undergraduate Council
 New Course Course Change
 Core Category: _____ Effective Fall 2007

or

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

RECEIVED OCT 03 2006

APPROVED JAN 24 2007

1. Department: PPS College: PHAR

2. Person Submitting Form: Kelly Standifer/Shara Zatopek Telephone: 3-1771/3-1262

3. Course Information on New/Revised course:

• Instructional Area / Course Number / Long Course Title:

PHAS ~~PHSC~~ / 3100 / Careers in Pharmaceutical Sciences

• Instructional Area / Course Number / Short Course Title (30 characters max.)

PHAS ~~PHSC~~ / 3100 / CAREERS IN PHARMACEUTICAL SCI.

• SCH: 1.00 Level: JR CIP Code: _____ Lect Hrs: 1 Lab Hrs: 0

4. Justification for adding/changing course: To provide for new discipline areas

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): 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

• 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: seminar

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: (If there are no prerequisites, type in "none".)

Cr: 1 (1-0). Prerequisites: None Description (30 words max.): An overview of various career opportunities in the pharmaceutical sciences, presented by professionals in those areas.

11. Dean's Signature: _____

Date: 9/7/06

Print/Type Name: Sunny E. Ohia, Ph.D.