CBM003 ADD/CHANGE FORM

☑ Undergraduate Council  ☑ New Course  ☐ Course Change
Core Category: NONE  Effective Fall 2009

☐ Graduate/Professional Studies Council  ☐ New Course  ☐ Course Change
Effective Fall___

1. Department: School of Theatre & Dance  College: CLASS
2. Faculty Contact Person: Kevin Rigdon  Telephone: 3-2816  Email: krigdon@uh.edu
3. Course Information on New/Revised course:
   • Instructional Area / Course Number / Long Course Title:
     THEA / 3373 / Makeup and Hair Design
   • Instructional Area / Course Number / Short Course Title (30 characters max.)
     THEA / 3373 / MAKEUP AND HAIR DESIGN
   • SCH: 3.00  Level: IR  CIP Code: 5005020003  Lect Hrs: 2.0  Lab Hrs: 1.0
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., Theatre
   • 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
   ____/____/____
   • Course ID: ____  Effective Date (currently active row): ____
9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr. 3. (2-1). Prerequisites: THEA 3362 and consent of instructor.  Description (30 words max.):
   Principles and techniques of makeup and hair design for theatre, opera and film.
10. Dean's Signature: ____________________________ Date: 10/22/08
    Print/Type Name: Dr. Sarah Fishman

- Created on 10/22/2008 3:53:00 PM -