CBM003 ADD/CHANGE FORM

CBM003 ADD/CHANGE FORM AFFECT OF FEB 2 4 1813			
\boxtimes	Undergraduate Council	or	Graduate/Professional Studies Council
\boxtimes	New Course Clange		☐ New Course ☐ Course Change
Co	re Category: Effective Fall 2010		Effective Fall
1.	Department: Health and Human Performance	College:	EDUC RECEIVED OCT 1 6 2009
2.	Faculty Contact Person: <u>Dr. Charles Layne</u> T	elephone	: 39868 Email: clayne2@uh.edu
3.	Course Information on New/Revised course: • Instructional Area / Course Number / Long Course Title: <u>PEB</u> / <u>1113</u> / <u>Wii Performance</u>		
	Instructional Area / Course Number / Short <u>PEB</u> / <u>1113</u> / <u>WII PERFORMANCE</u>	Course T	itle (30 characters max.)
	• SCH: <u>1.00</u> Level: <u>FR</u> CIP Code: <u>36.010</u>	8.00 13	Lect Hrs: <u>0</u> Lab Hrs: <u>3</u>
4.	Justification for adding/changing course: Succ	essfully t	aught as a selected topics course
5.	Was the proposed/revised course previously of If Yes, please complete: Instructional Area / Course Number / Long PEB / 4197 / Selected Topics		
	• Course ID: <u>37006</u> Effective Date (curren	tly active	row): <u>8242009</u>
6.	 Authorized Degree Program(s): Does this course affect major/minor require Does this course affect major/minor require Can the course be repeated for credit? 	ments in	
7.	Grade Option: <u>MU (multiple types)</u> Instrumust match item 3, above.)	ction Typ	e: <u>laboratory ONLY</u> (Note: Lect/Lab info.
8.	If this form involves a change to an existing course inventory: Instructional Area / Cou//		
	Course ID: Effective Date (current)	ly active i	row):
9.	Proposed Catalog Description: (If there are no Cr: 1. (0-3). Prerequisites: Description center of balance, improvement of knowledge nutrition utilizing Nintendo Wii.	on (30 wo	rds max.): Instruction and practice of posture, and fitness, and basic principles of proper
10.	Dean's Signature: Print/Type Name: Dr. Dean Wimpelberg	are)	Date: 10/15/09

ORIGINAL