

CBM003 ADD/CHANGE FORM

APPROVED FEB 23 2011

Undergraduate Council
 New Course Course Change
 Core Category: _____ Effective Fall 2011

or

Graduate/Professional Studies Council
 New Course Course Change
 Effective Fall 2011

1. Department: _____ College: ARCH
 2. Faculty Contact Person: Lannis Kirkland Telephone: 3-2363 Email: lkirkland@uh.edu

3. Course Information on New/Revised course:
 • Instructional Area / Course Number / Long Course Title:
INDS / 4280 / Design Internship
 • Instructional Area / Course Number / Short Course Title (30 characters max.)
INDS / 4280 / DESIGN INTERNSHIP
 • SCH: 2.00 Level: SR CIP Code: 5004040003 Lect Hrs: 2 Lab Hrs: 0

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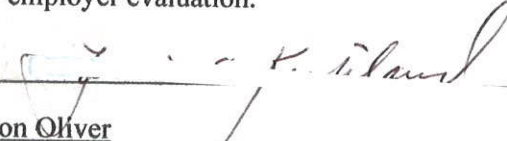
4. Justification for adding/changing course: To reflect change in prerequisite course
 5. Was the proposed/revised course previously offered as a special topics course? Yes No
 If Yes, please complete:

• Instructional Area / Course Number / Long Course Title:
 _____ / _____ / _____
 • Course ID: _____ Effective Date (currently active row): _____

6. Authorized Degree Program(s): BS Industrial Design
 • 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: practicum (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
INDS / 4280 / Design Internship
 • Course ID: 28339 Effective Date (currently active row): 8202007

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
 Cr: 2. (2-0). Prerequisites: INDS 3501 and prior written approval from the dean. Description (30 words max.): Application of design knowledge and techniques through work experience at design consultancies or related companies. Requires employer evaluation.

10. Dean's Signature: FOR PBO  Date: 10.15.10
 Print/Type Name: Patricia Belton Oliver