

UC 11380 11F

CBM003 ADD/CHANGE FORM

APPROVED DEC 07 2011

Undergraduate Council
 New Course Course Change
 Core Category: _____ Effective Fall 2012

or

Graduate/Professional Studies Council
 New Course Course Change
 Effective Fall 2012

1. Department: HRMA College: HRM
 2. Faculty Contact Person: Nancy Graves Telephone: 713-743-2426 Email: nsgraves@central.uh.edu

3. Course Information on New/Revised course:
 • Instructional Area / Course Number / Long Course Title:
HRMA / 2220 / Food and Beverage Service
 • Instructional Area / Course Number / Short Course Title (30 characters max.)
HRMA / 2220 / FOOD AND BEVERAGE SERVICE
 • SCH: 2.00 Level: SO CIP Code: 5209050016 Lect Hrs: 1 Lab Hrs: 24

RECEIVED OCT 14 2011

4. Justification for adding/changing course: **To enable better course content delivery**
 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.S., Hotel & Restaurant Management
 • 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
HRMA / 2220 / FOOD AND BEVERAGE SERVICE
 • Course ID: 45390 Effective Date (currently active row): 8252008

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
 Cr: 2. (1-4). Prerequisites: HRMA 1422. Description (30 words max.): (formerly HRMA 1220)
 Prerequisite: HRMA 1422. Service styles, practices, and procedures in food service operations, including laboratory experiences.

10. Dean's Signature: _____ Date: 10-14-11

Print/Type Name: Dr. Carl A. Boger, Jr.