

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 / 3387 / Management & Operations of Senior Living Facilities
 - Instructional Area / Course Number / Short Course Title (30 characters max.)
HRMA / 3387 / OPS OF SENIOR LIVING FACILITES
 - SCH: 0.00 Level: JR CIP Code: 5209010016 Lect Hrs: 3 Lab Hrs: 0

RECEIVED OCT 14 2011

4. Justification for adding/changing course: Successfully taught as a selected topics 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:
HRMA / 4397 / Selected Topics Hosp. Mgt.
 - Course ID: 27329 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 ONLY (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. (3-0). Prerequisites: ENGL 1304. Description (30 words max.): Career opportunities, management and operation of senior living facilities.

10. Dean's Signature: [Signature] Date: 10/6/11

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