

CBM003 ADD/CHANGE FORM

UC 11610 IIF

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

or

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

APPROVED FEB 22 2012

1. Department: Health and Human Performance College: CLASS
 2. Faculty Contact Person: Dr. Brian McFarlin Telephone: 3-9929 Email: bmcfarlin@uh.edu

3. Course Information on New/Revised course:
 • Instructional Area / Course Number / Long Course Title:
KIN / 3306 / Physiology of Human Performance
 • Instructional Area / Course Number / Short Course Title (30 characters max.)
KIN / 3306 / PHYSIOLOGY-HUMAN PERFORM
 • SCH: 3.00 Level: JR CIP Code: 31.0505.00 14 Lect Hrs: 3 Lab Hrs: 0

RECEIVED OCT 14 2011

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 Kin: Ex Sci, Fitness/Sports; BS Human Nutrition and Foods
 • 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
KIN / 3306 / Physiology-Humn Perfom
 • Course ID: 29005 Effective Date (currently active row): 1/18/2011

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
 Cr: 3. (3-0). Prerequisites: Sophomore standing and six hours of biology. Description (30 words max.):
The changes in physiological functions resulting from physical activity.

10. Dean's Signature: _____ Date: 10/13/11
 Print/Type Name: Sarah Fishman