CBM003 ADD/CHANGE FORM  

Approved Jan 2, 2014

☒ Undergraduate Committee
☐ New Course ☒ Course Change
Core Category: NONE Effective Fall 2014

☐ Graduate/Professional Studies Committee
☐ New Course ☐ Course Change
Effective Fall 2014

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 (*see CBM003 instructions) / Long Course Title:
     ARCH / 4344 / Architectural Programming and Building Regulations
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     ARCH / 4344 / ARCH PROGRAMMING/BLDS REGULATN
   - SCH: 3.00  Level: SR  CIP Codel: 04.0201.00.06  Lect Hrs: 3  Lab Hrs: 0
   - Term(s) Course is Offered (*see CBM003 instructions about selection):
     Fall, Spring, Summer

4. Justification for adding/changing course: To delete course from inventory

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): BARCH
   - 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. *See CBM003 instructions.)

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
   ARCH / 4344 / Architectural Programming and Building Regulations
   - Course ID: 11426  Effective Date (currently active row): 8262013

9. Proposed Catalog Description: (If there are no prerequisites, type in "none".)
   Cr:  . ( _____ ). Prerequisites: ________ Description (30 words max.):

10. Dean's Signature: ___________________ Date: 10.3.13
    Print/Type Name: Patricia Belton/Oliver

- Created on 9/26/13 2:06 PM -