CBM003 ADD/CHANGE FORM

Undergraduate Council
or
Graduate/Professional Studies Council

New Course [ ] Course Change

Core Category: None Effective Fall 2010

1. Department: Political Science College: CLASS

2. Faculty Contact Person: Scott Basinger Telephone: 713-743-3911 Email: sjbasinger@uh.edu

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     OSS / 3303 / Research Quality Assurance
   - Instructional Area / Course Number / Short Course Title (30 characters max.):
     OSS / 3303 / RESEARCH QUALITY ASSURANCE
   - SCH: 3.00 Level: JR CIP Code: 52.1302.00 Lect Hrs: 3 Lab Hrs: 0

4. Justification for adding/changing course: To provide for new discipline areas

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):
   [ ] 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.? QSS 3302 or equivalent. Description (30 words max.): Assessment, measurement, and interpretation of data. Methods for assuring datasets and databases are accurate, accessible, consistent, reliable, secure, and timely.

10. Dean's Signature: ____________________________ Date: 09/23/09

Print/Type Name: Dr. Sarah Fishman

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