CBM003 ADD/CHANGE FORM

Undergraduate Council

[ ] New Course [ ] Course Change

Core Category: ______  Effective Fall 2010

or

Graduate/Professional Studies Council

[ ] New Course [ ] Course Change

Effective Fall ______

1. Department: HRMA  College: HRM

2. Faculty Contact Person: Jeremy L. Dafoe  Telephone: 713-743-3740  Email: jdafoe@uh.edu

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     HRMA / 2373 / Introduction to SPA Management
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     HRMA / 2373 / INTRODUCTION TO SPA MANAGEMENT
   - SCH: 3.00  Level: SO  CIP Code: 5209060016  Lect Hrs: 3  Lab Hrs: 0

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): 8/24/09

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: None  Description (30 words max.): An overview of the history and understanding of the nature of the spa industry, its history, culture and characteristics. To develop working and hands-on knowledge of spa operations.

10. Dean's Signature: ________________________  Date: ________________

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

- Created on 9/8/2009 10:10:00 AM -