CBM003 ADD/CHANGE FORM

☐ Undergraduate Council  or  ☐ Graduate/Professional Studies Council
☐ New Course  ☒ Course Change
Core Category:  _______  Effective Fall 2010

1. Department: Health and Human Performance  College: EDUC

2. Faculty Contact Person: Dr. Joel Bloom  Telephone: 39847  Email: j bloom@uh.edu

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     KIN / 3301 / Design and Evaluation of Physical Activity Programs
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     KIN / 3301 / DESIGN/EVAL PHYS ACTIVITY PROG
   - SCH: 3.00  Level: JR  CIP Code: 13.1314.00 4 D Lect Hrs: 3  Lab Hrs: 0

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): B.S. Kinesiology: Wellness/Fitness
   - 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 / 3301 / Design and Evaluation of Physical Activity Programs
   - Course ID: 29001  Effective Date (currently active row): 8252007

9. Proposed Catalog Description: (If there are no prerequisites, type in "none").
   Cr: 3. (3-0).  Prerequisite: Credit for or concurrent enrollment in KIN 1252.  Description (30 words max.): Design and Evaluation of physical education and activity programs.

10. Dean’s Signature: ___________________________  Date: 10/15/09

Print/Type Name: Dr. Robert Wimpelberg

- September 16, 2009 update -