CBM003 ADD/CHANGE FORM

☐ Undergraduate Council
☐ New Course  ☐ Course Change
Core Category:  NONE   Effective Fall 2013

☐ Graduate/Professional Studies Council
☐ New Course  ☐ Course Change
Effective Fall 2013

1. Department:  HON  College: Other
2. Faculty Contact Person:  Laurie Clements Lambeth  Telephone: 713-869-8096  Email: lclemens@uh.edu
3. Course Information on New/Revised course:
   • Instructional Area / Course Number / Long Course Title:
     HON / 3305 / Medicine in Performance
   • Instructional Area / Course Number / Short Course Title (30 characters max.):  
     HON / 3305 / Medicine in Performance
   • SCH: 3.00  Level: IR  CIP Code: 23.0101.0001  Lect Hrs: 03  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):  BA/BS, Medicine and Society minor and Center for Creative Work minor
   • 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:  ENGL 1304.  Description (30 words max.):  Study of theatrical and cinematic depictions of illness, disability, and the medical situation, and their reflections in performed social expectations of medical professionals and patients.

10. Dean’s Signature: ___________________________  Date: 10/8/12
    Print/Type Name:  William Monroe, Ph.D