CBM003 ADD/CHANGE FORM

☐ Undergraduate Council
☐ New Course ☐ Course Change
Core Category: _____ Effective Fall 2013

or

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

1. Department: Health and Human Performance College: CLASS

2. Faculty Contact Person: Claudia Scott Telephone: 3-4025 Email: cwscott@uh.edu

3. Course Information on New/Revised course:
   • Instructional Area / Course Number / Long Course Title:
     NUTR / 4350 / Global Health and Nutrition
   • Instructional Area / Course Number / Short Course Title (30 characters max.)
     NUTR / 4350 / GLOBAL HEALTH AND NUTRITION
   • SCH: 3.00 Level: SR CIP Code: 19.0505.00.16 Lect Hrs: 3 Lab Hrs: 0

4. Justification for adding/changing course: To meet professional/accreditation standards.

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): BS in Human Nutrition and Foods (CADE accredited track)
   • 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: NUTR 2332 Description (30 words max.): overview of emerging issues in
   international nutrition and public health.

10. Dean’s Signature: __________________________ Date: 10/8/12
    Print/Type Name: Sarah Fishman

- Created on 9/15/12 7:35 AM -