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: Management  College: BUS

2. Faculty Contact Person: Joaquin Diaz-Saiz  Telephone: 34713  Email: jdiaz-saiz@uh.edu

3. Course Information on New/Revised course:
   - Instructional Area / Course Number / Long Course Title:
     MANA / 4396 / Management Internship
   - Instructional Area / Course Number / Short Course Title (30 characters max.)
     MANA / 4396 / MANAGEMENT INTERNSHIP
   - SCH: 3.00  Level: JR  CIP Code: 5101010016  Lect Hrs: 0  Lab Hrs: 3

4. Justification for adding/changing course: To incorporate new developments in discipline

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): BBA
   - 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: S/U (satisfactory/unsatisfactory)  Instruction Type: practicum, cooperative education
   (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: MANA 3335 and approval of department chair.  Description (30 words
   max.): Enhancement of concepts and techniques learned in the classroom through work experience
   directly related to the profession.  Written report required.

10. Dean’s Signature: ____________________________  Date: 10-10-12

Print/Type Name: Teri Elkins Longacre