



1. Will this new course affect a current program?

If "yes", has a Program Revision Form been submitted concurrently?

Yes ☐ No ☐

Yes ☐ No ☐

2. Teaching Department:

3. Administering
Faculty/Unit:

6. Responsible
Instructor

4. Campus
(Downtown, Macdonald,
Off Campus, Distance
Ed, Other – specify)

5. Effective Term of Implementation
(Ex. Sept. 2004 = 200409)

Term:

7. Course Title (Limit 30 Characters) - required for all courses:

9. Course Title to Appear in the Calendar (optional)

(Limit 59 characters):

Note: This can ONLY be an expansion of word(s) abbreviated in the
30 character course title above.

10. Credit Weight
(or CEU's for non-credit CE courses):

8. Course Number(s)

Indicate course number & the number of terms spanned:
(tick all that apply)

Subject/course number:

Course(s) Span:

☐ 1 term

☐ 2 consecutive terms (D1, D2)

☐ 2 non-consecutive terms (N1, N2)

☐ 3 consecutive terms (J1, J2, J3)

11. Rationale for new course

12. Course Description

(as it will appear in the Calendar [maximum 50 words]):

(N.B. Faculty of Medicine must append complete course outline)

13. Supplementary information to appear in the Calendar in addition to the course description.

Such as: equivalent course(s), contact hours, enrolment limitations, language of instruction etc.

Please enter the information as it should appear in the calendar notes.

14. Schedule Types(s):

(Enter all that apply – see course guidelines for a complete list.)
(i.e. Lecture, Labs, Tutorial)

Hours per Week	Hours per Week	Hours per Week
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Total Hours per Week:		<input type="text"/>
Total Number of Weeks:		<input type="text"/>

15. Projected Enrolment:

16. Required text and/or preliminary reading list sent to library?

☐ Yes ☐ No

17. Prerequisite(s) (Courses or Tests)

Specify course number(s) or name(s) of test(s):

If the student does not have a prerequisite
should web registration be blocked?

☐ Yes ☐ No

If "Yes" complete A and B:

A. Indicate minimum grade or test score(s) the student
must attain in prerequisite course(s) or test(s):

B. Can the prerequisite course(s) or test(s) be taken in the
same term as this course?

☐ Yes ☐ No

18. Corequisite(s) Course Number(s):

Specify course number(s) and title(s):

If the student does not register for the corequisite
in the same term should web registration be blocked?

☐ Yes ☐ No

19. Restriction(s):

20. Consultation Reports Attached

☐ Yes ☐ N/A

21. Additional Course Charges (must be approved by the Fee
Policy Committee)

Description of Fee
(e.g. screening fee)

Amount

<input type="text"/>	<input type="text"/>
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22. Requires Teaching, Physical, or Financial Resources
Not Currently Available (attach explanation)

☐ Yes ☐ No

INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE		
<i>To be completed by the Faculty</i> Slot Course: <input type="checkbox"/> Yes <input type="checkbox"/> No Thesis Component: <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>To be completed by ARR</i> CIP Code <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<i>For Continuing Education Use</i> CE Admin. Unit : <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div> CE Non-Grant Courses: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div> Flat Rate: CdnFlat Rate: <input type="checkbox"/> Yes <input type="checkbox"/> N/A

23. Approvals:						
Routing Sequence	Departmental Meeting	Departmental Chair	Other Faculty	Curric/Academic Committee	Faculty	SCTP
Name	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Signature	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Date	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
Departmental Contact Person (name/phone/email)	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					