



AC-05-95

(07/2004)

1. Will this new course affect a current program? Yes No
If "yes", has a Program Revision Form been submitted concurrently? Yes No

2. Teaching Department:

3. Administering Faculty/Unit:

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:

(Limit 59 characters):
Note: This can ONLY be an expansion of word(s) abbreviated in the 30 character course title above.

6. Responsible Instructor
(or CEU's for non-credit CE courses):

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.

INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE

To be completed by the Faculty

Slot Course: Yes No

Thesis Component: Yes No

To be completed by ARR

CIP Code

For Continuing Education Use

CE Admin. Unit :

CE Non-Grant Courses:

Flat Rate: CdnFlat Rate: Yes N/A

23. Approvals:

Routing
Sequence

Departmental
Meeting

Departmental
Chair

Other
Faculty

Curric/Academic
Committee

Faculty

SCTP

Name

Signature

Date

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Departmental
Contact Person
(name/phone/email)

