



AC-04-81  
**New Course Proposal Form**  
 (09/2003)

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:

wn  wn  na  
 Off Campus, Distance Ed, Other – specify)

5. Effective Term of Implementation  
 (Ex. Sept \_\_\_\_\_ t \_\_\_\_\_ ,

(Limit 59 characters):  
 Note: This can ONLY be an expansion of word(s) abbreviated in the

7. 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)

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

Supervised reading & writing

Hours per Week

Total Hours per Week:

Total Number of Weeks:

11. Projected Enrolment:

**12. 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:

**13. 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

Yes      No

**18. Course Description**  
(as it will appear in the Calendar [maximum 50 words]):  
(N.B. Faculty of Medicine must append complete course outline)

**19. Supplementary information**

