

Request for Calendar Change Form

Tracking No:
(Senate Secretary's Office
use only)
Date:

To	Secretary of Senate	
From	Name(Dean):	Faculty
	Bahram Dadgostar	Faculty of Business Administration
	Department the change relates to	
	Faculty of Business Administration	
	Contact Person	
	R. M. Isotalo	

Is the proposed calendar change Undergraduate

Instructions:

1. In all cases please complete and attach section 1 and 2
2. If the calendar change affect other departments/schools/faculties complete and attach section 3
3. If the answer to any of the questions below is yes, explain. Attach separate sheets with reference to the question

- | | | |
|--|--|---|
| 1. Do the proposed changes affect other departments/ schools/faculties in terms of their calendar change? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 2. Is a transition plan needed for student in progress? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 3. Are the proposed changes likely to affect student enrollment in your department/school/faculty? | Yes
<input checked="" type="checkbox"/> | No
<input type="checkbox"/> |
| 4. Are the proposed changes likely to affect student enrollment in other departments/schools/faculties at Lakehead University? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 5. Will the proposed changes require additional teaching space and/or teaching staff and/or equipment and/or other resources? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 6. Will the proposed changes affect existing teaching loads within your department/school/faculty? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 7. Will the proposed changes increase demand for teaching support services such as the library, computing services and technical staff ? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 8. Will the proposed change require direct or in-kind support from outside the academic unit? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 9. Do the proposed changes include change in course(s) which is/are required core course(s) for a major? | Yes
<input type="checkbox"/> | No
<input checked="" type="checkbox"/> |
| 10. Do the proposed changes include a change in course which is | Yes | No |

service/required course(s) in another program?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Do the proposed changes include change in course(s) which is/are open elective available to any student in any program?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
12. Do the proposed changes include change in course(s) which is/are elective in a major i.e. restricted to students in a major?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Signatures:	Date approved by faculty council 04/11/2011	

Section 1
Description of the Proposed Calendar Change: Certificate in Business Information Technology Management
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
A series of courses designed to improve the competence of individuals in establishing and managing information technologies in organizational settings.

Section 2

<p>Existing Calendar Entries: (Page reference based on hard copy or URL based on electronic version of calendar)</p>	<p>Proposed Calendar Entries/Addition/ Deletion -If only addition, specify page number and placement in university calendar -If only deletion, write Deleted</p>
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<p>[Redacted]</p>	<p>Certificate in Business Information Technology Management</p> <p>A series of courses designed to improve the competence of individuals in establishing and managing information technologies in organizational settings.</p> <p>Admission Requirements: This program is fully open to non-business students enrolled in any degree program at Lakehead University.</p> <p>Academic Requirements: 1. All courses required for the certificate must be taken at Lakehead University, unless permitted by the Dean of the Faculty of Business Administration. 2. The certificate will be conferred at the same time as/upon completion of a degree at Lakehead University provided the student has attained a grade of no less than 60% in each of the courses of the certificate program.</p> <p>Required Courses: Business 1011 or 1511 Business 1013 (Business Computing) or 1513 (Basics of Business Computing) Business 2033 (Management Information Systems) Business 3213 (System Analysis and Design)</p> <p>Any two courses out of the following: Business 3293 (Database Processing) Business 3273 (Website Design and Administration) Business 3073 (Business Applications Programming) Business 4273 (Electronic Business Strategies) Business 4253 (Advanced System Analysis and Design) – Note that 3213 is a prerequisite.</p>
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Section 3

The Faculty(ies) affected by the proposed calendar change

University wide program - this program is only open to non-business students enrolled in any degree prog...

I have been consulted regarding the attached calendar change and understand the academic and budgetary implication on my Dept./School/Faculty.

I agree to this calendar change proposal

Yes

No

Name:

Barram Dadgostar

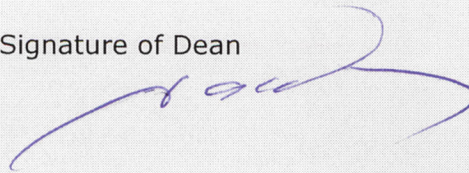
Faculty:

Business Admin.

Date:

Nov 7 - 2011

Signature of Dean



Certificate in Business Information Technology Management

Question 3 - Changes in student enrolment.

Based on our discussion with the colleagues at other universities, it is expected that the certificate program will attract from 5 to 10 students per year. This will increase the overall enrolment in related courses and the entire faculty. In all courses required for the certificate program, there is sufficient space available to accommodate the expected number of students.