

## Request for Calendar Change Form

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

To Secretary of Senate  
From Name(Dean): Faculty  
Andrew P. Dean SES  
Department the change relates to  
Mathematical Sciences  
Contact Person  
Adam Van Tuyl

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<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| 2. Is a transition plan needed for student in progress?  | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| 3. Are the proposed changes likely to affect student enrollment in your department/school/faculty?                                       | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| 4. Are the proposed changes likely to affect student enrollment in other departments/schools/faculties at Lakehead University?           | Yes<br><input type="checkbox"/> | No<br><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<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| 6 Will the proposed changes affect existing teaching loads within your department/school/faculty?  | Yes<br><input type="checkbox"/> | No<br><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<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |
| 8. Will the proposed change require direct or in-kind support from outside the academic unit?  | Yes<br><input type="checkbox"/> | No<br><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<br><input type="checkbox"/> | No<br><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?  Yes  No
11. Do the proposed changes include change in course(s) which is/are open elective available to any student in any program?  Yes  No
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  No

Signatures:

Date approved by faculty council  
15/11/2011

Section 1
Description of the Proposed Calendar Change: Removing Minor Program in Statistics
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
RATIONALE:  The Minor Program in Statistics cannot be offered since three of the required courses (Math 3335, 4331, 4335) are no longer active. We are removing this program from our calendar since it not possible for the department to provide this minor with our current resources.

Section 2

Existing Calendar Entries:  
(Page reference based on hard copy or  
URL based on electronic version of  
calendar)

Proposed Calendar Entries/Addition/ Deletion  
-If only addition, specify page number and  
placement in university calendar  
-If only deletion, write Deleted

1

<http://mycoursecalendar.lakeheadu.ca/pg550.html>

5. Minor Program in Statistics

[Deleted]

An overall average of 60% is required.

(a) Mathematics 1171, 1172, 2331, 2333,  
3335, 4331, 4335

(b) Economics 4217

Section 3

The Faculty(ies) affected by the proposed calendar change

Science and Environmental Studies (Mathematical Sciences)

**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:

Adam Van Tuyl

Faculty:

Dept. of Mathematical Sciences

Date:

07/11/2011

Signature of Dean

I agree to this calendar change proposal                      Yes                       No

Name:

A.P. Dean (Dean of SES)

Faculty:

Science and Environmental Studies

Date:

Signature of Dean

