

Request for Calendar Change Form

Tracking No:
 (Senate Secretary's Office
 use only)
 Date:
 12/10/2011

To Secretary of Senate
 From Name(Dean): Faculty
 Dr. Andrew Dean Science and Environmental Studies
 Department the change relates to
 Chemistry
 Contact Person
 Dr. Gregory J. Spivak

Is the proposed calendar change Graduate

Instructions:

1. In all cases please provide a brief description of the proposed change.
2. If the calendar change affect other departments/schools/faculties at Lakehead University.
3. If the answer to any of the questions above is "Yes" please provide a brief description of the proposed change.

- | | | |
|--|---------------------------------|---|
| 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 type="checkbox"/> | No
<input checked="" 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 service/required course(s) in another program? | Yes
<input type="checkbox"/> | No
<input 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

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

Section 1

Description of the Proposed Calendar Change:

A change to the Admission Requirements to the PhD program in Chemistry and Materials Science

Rationale of the Proposed Calendar Change(s):

(Corresponding to Section 2 where required)

To clarify the Admission Requirements to the program

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

<http://mycoursecalendar.lakeheadu.ca/pg771.html>

Admission will be subject to the availability of a primary supervisor(s) for the student. Normally, an applicant to the Program would be expected to have completed a Master's Degree in one of the fields of specialization (Physical Chemistry, or Molecular and Materials Science). Applicants who do not have a Master's degree in one of the fields of specialization will be considered on a case-by-case basis and, if admitted, may have additional course requirements. Students in year-1 of a Master's degree program in one of the fields of specialization may apply for transfer into the PhD Program provided that they have successfully completed 2.0 full course equivalents towards the Master's degree and have had their research proposal approved by the Program Committee

Section 3

The Faculty(ies) affected by the proposed calendar change

Science and Environmental Studies

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:

Faculty:

Date:

Nov. 3 / 11

Signature of Dean

