

Request for Calendar Change Form

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

Date:

06/11/2008

To	Secretary of Senate	
From	Name(Dean):	Faculty
	Gillian Siddall	Social Sciences and Humanities
	Department the change relates to	
	Political Science	
	Contact Person	
	S.S. Islam	

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 checked="" type="checkbox"/> | No
<input 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 | 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

Section 1
Description of the Proposed Calendar Change: Delete POLI 4211 - Cross Calendared with Northern Studies 4211
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
<input type="text"/>
Material redundant

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://bolt.lakeheadu.ca/~calendar/current/programs/Faculty_of_SocSci_&_Humanities/policse.html

Political Science 4211/Northern Studies 4211
Native and Northern Political Movements in
Canada
Prerequisite: A course in Political Science or
permission of the instructor
An analysis of the current trends in Native and
Northern politics in Canada and the
evaluation of the content and context for
Native and Northern self-government and
empowerment.

delete

Section 3

The Faculty(ies) affected by the proposed calendar change

Northern 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:

Signature of Dean