## **Request for Calendar Change Form**

Tracking No: (Senate Secretary's Office use only) Date: 07/01/2009

То Secretary of Senate

From

Name(Dean):	Faculty	
Dr. Andrew P. Dean	Science & Environmental Studies	
Department the change relates to		
Mathematical Sciences		
Contact Person		
Dr. Andrew J. Dean		

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

10. Do the proposed changes include a change in course which is Yes No

service/required course(s) in another program?		~
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 🔽

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Sig	natures:

Date approved by	faculty council
03/03/2009	
03/03/2003	

Section 1
Description of the Proposed Calendar Change:
Title changed to more accurately describe the course.
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
The change in the title is to more accurately describe the course. The addition to the restriction is to deal with the case of students who start in a concurrent education program, but then switch to another 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
1 211	
Mathematics 0140 Topics in Mathematics 3-0; 3-0 Topics covered in this course include: numeracy and number sense, measurement, geometry and spacial reasoning, patterning, algebra, probability, and data management. Special attention is given to the development of a conceptual understanding of mathematics, as well as the appropriate use of manipulatives and concrete materials. This course is open only to students in either a Primary-Junior or Junior-Intermediate Concurrent Education program.	Mathematics 0140 Fundamental Concepts of Elementary Mathematics for Teachers 3-0; 3-0 Topics covered in this course include: numeracy and number sense, measurement, geometry and spacial reasoning, patterning, algebra, probability, and data management. Special attention is given to the development of a conceptual understanding of mathematics, as well as the appropriate use of manipulatives and concrete materials. This course is open only to students in either a Primary-Junior or Junior-Intermediate Concurrent
	Education program. This course may not be used to fulfill Math or Science elective requirements.

Section 3

The Faculty(ies) affected by the proposed calendar change

## 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:		
Dr. A. P. Dean		
Faculty:		
Science & Environmental Studies		
Date:		
04/03/2009	Signature of Dean	