

## Request for Calendar Change Form

Tracking No:  
(Senate Secretary's Office  
use only)  
Date:  
24/09/2009

To Secretary of Senate  
From Name(Dean): Faculty  
Andrew Dean SES  
Department the change relates to  
Geography  
Contact Person  
Kamil Zaniewski

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 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  
Oct 1, 2009

Section 1
Description of the Proposed Calendar Change: Certificate in Mapping Science program change
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
This regulation has caused confusion, when a student is admitted by the Instructor into a course required for the Certificate without the prerequisite. It is not clear if the student should then have to go back and take the prerequisite before being granted the Certificate.

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

200

11. Certificate Program in Mapping Sciences  
The objectives of this program are to develop students' expertise in the many disciplines of Mapping Sciences, and to increase students' awareness of how the synergies of these technologies maximize the potential uses for spatial information. Mapping Sciences include cartography, map reading, air photo interpretation, geographic information systems, and remote sensing.  
All courses have prerequisites that must be met. The program is designed for students in a Geography degree program. It is not possible to obtain the Certificate in Mapping Sciences by taking only the required courses. Applicants must meet the University's admission requirements for mature students or a Bachelor of Arts or Bachelor of Science program.  
On successful completion of the following five half-courses with an overall average of 70% students will be awarded a Certificate in Mapping Sciences.

11. Certificate Program in Mapping Sciences  
The objectives of this program are to develop students' expertise in the many disciplines of Mapping Sciences, and to increase students' awareness of how the synergies of these technologies maximize the potential uses for spatial information. Mapping Sciences include cartography, map reading, air photo interpretation, geographic information systems, and remote sensing.

Applicants must meet the University's admission requirements for mature students or a Bachelor of Arts or Bachelor of Science program.  
On successful completion of the following five half-courses with an overall average of 70% students will be awarded a Certificate in Mapping Sciences.

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:



KAMIL ZANIEWSKI

Faculty:

SES

Date:

Oct. 31 09

24/09/2009

Signature of Dean

