

## Request for Calendar Change Form

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

To Secretary of Senate  
From Name(Dean): Faculty  
Dr. John O'Meara Faculty of Education  
Department the change relates to  
Lifelong Learning  
Contact Person  
Dr. Don Kerr

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  
20/11/2009

  
Acting Chair, 24 November 2009.

<p>Section 1</p> <p>Description of the Proposed Calendar Change: Outdoor Experiential Education be created and calendared as EDUC 4708 with the following course description.</p> <p>Credit Weight: 1.0</p> <p>Description: K-12 teachers are provided with the theoretical foundations of outdoor experiential education, and the necessary program planning, development and implementation, instructional strategies, assessment and evaluation, and support for ongoing professional growth required for high quality outdoor experiential education.</p> <p>Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)</p> <p>This additional qualification course is being developed and will be submitted to the Ontario College of Teachers for initial accreditation. The course must be calendared in order for it to be offered.</p>
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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

EDUC 4708: Outdoor Experiential Education

Credit Weight: 1.0

Description:

K-12 teachers are provided with the theoretical foundations of outdoor experiential education, and the necessary program planning, development and implementation, instructional strategies, assessment and evaluation, and support for ongoing professional growth required for high quality outdoor experiential education.

Section 3

The Faculty(ies) affected by the proposed calendar change

Faculty of Education

**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:

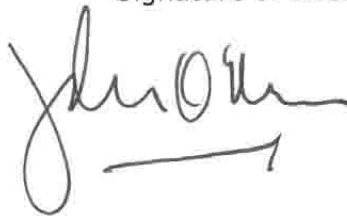
Dr. John O'Meara

Faculty:

Faculty of Education

Date:

Signature of Dean

A handwritten signature in black ink, appearing to read "John O'Meara", with a horizontal line underneath it.