

5515/
4415

Request for Calendar Change Form

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

Date:

23/08/2010

To Secretary of Senate

From Name(Dean): Faculty

Gillian Siddall

Social Sciences and Humanities

Department the change relates to

School of Outdoor Recreation, Parks and Tourism

Contact Person

Raynald Harvey Lemelin

Is the proposed calendar change Graduate

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 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 | 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

25/01/2010



Section 1
Description of the Proposed Calendar Change: To change graduate/undergraduate "cross-timetabled" course OUTD 5515/OUTD 4415 status (it will no longer be offered as a graduate course)
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <p>Course has not been in ORPT in several years. Course is not consistently instructed by a member of the faculty of graduate studies (see general criteria and procedures for membership in the FGS) for additional information.</p> </div>
<div style="border: 1px solid black; padding: 5px;"> <p>Students wishing to learn GIS can take it from F2350 or Geog 3251.</p> </div>

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/pg132.html>

Outdoor Recreation 5515 - Advanced GIS
and Remote Sensing in Parks and Protected
Areas

Deleted

Section 3

The Faculty(ies) affected by the proposed calendar change

Social Sciences and Humanities

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

Siehan S. Adael

Oct 23, 2010