

Request for Calendar Change Form

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

Date:

To Secretary of Senate
From Name(Dean): Faculty
 Faculty of Social Sciences & Humanities
 Department the change relates to

 Languages
 Contact Person

 Dr. Vincent Schonberger

Is the proposed calendar change ~~Graduate~~ **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 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:

Vincent L. Schonberger

Date approved by faculty council

10/12/2010

Section 1
Description of the Proposed Calendar Change: Study of sentence and discourse structure in Algonquian languages spoken by students in the class. Examples are drawn from authentic texts. Advanced study of Roman and syllabic orthographic principles. Reading and writing exercises from the class study
Rationale of the Proposed Calendar Change(s): (Corresponding to Section 2 where required)
1 Changed to reflect the current content of the course.

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

<http://mycoursecalendar.lakeheadu.ca/pg174.html>

Guided individual or small group work on selected Algonquian structural and orthographic projects relating to the development of written materials of increasing difficulty in the student's own language.

Study of sentence and discourse structure in Algonquian languages spoken by students in the class. Examples are drawn from authentic texts. Advanced study of Roman and syllabic orthographic principles. Reading and writing exercises from class study.

Section 3

The Faculty(ies) affected by the proposed calendar change

Dean of Education, Dr. John O'Meara

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. Gillian Siddall, Dean

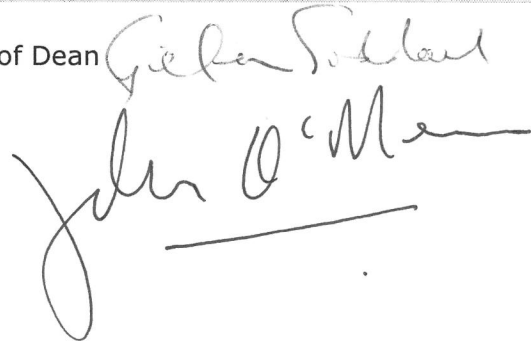
Faculty:

Faculty of Social Sciences & Humanities

Date:

16/12/2010

Signature of Dean


The block contains two handwritten signatures in cursive. The first signature is 'Gillian Siddall' and the second is 'John O'Meara'. A horizontal line is drawn under the second signature.