

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
 Aboriginal Education Dept.
 Contact Person
 Dr. Paul Berger (Acting) Chair

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
<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
10/12/2010

ED 1354 NASL Methods, Part IV

Section 1
<p>Description of the Proposed Calendar Change:</p> <p>An examination of the psychology of second language learning as it relates to other content learning, literacy, analytic skills and literature appreciation. A supervised practicum will provide opportunity to teach a class at a level other than the one taught in Part III.</p>
<p>Rationale of the Proposed Calendar Change(s):</p> <p>(Corresponding to Section 2 where required)</p> <p><input type="checkbox"/></p> <p>Changed to reflect the current content of the course</p>

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

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<http://mycoursecalendar.lakeheadu.ca/pg203.html>

An examination of the psychology of second language learning as it relates to other content learning, literacy, analytic skills and literature appreciation. A supervised practicum will provide opportunity to teach a class at a level other than the one taught in Part III.

An examination of the psychology of Native language learning as it relates to other content learning, literacy, analytic skills and literature appreciation. A supervised practicum will provide opportunity to teach a class at a level other than the one taught in Part III.

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. John O'Meara

Faculty:

Faculty of Education

Date:

16/12/2010

Signature of Dean

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