

## 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  
Professional Development in Education  
Contact Person  
Dr. Teresa Socha

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  | 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

Section 1

Description of the Proposed Calendar Change:

Delete EDUC 4513 The Gifted and Talented, EDUC 4514 Specific Learning Disabilities, EDUC 4780 Professional Development II, EDUC 4707 Teaching Writing, EDUC 4518 Behavior Problems and Their Management and EDUC 4517 Communication Disorders from the University Calendar

Rationale of the Proposed Calendar Change(s):  
(Corresponding to Section 2 where required)

Under the Ontario College of Teachers' regulation 176/10, this course is no longer available for accreditation.  
The proposed change does not affect any other department/school/faculty.

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

[mycoursecalendar.lakeheadu.ca/pg264.html](http://mycoursecalendar.lakeheadu.ca/pg264.html)

EDUC 4513 The Gifted and Talented, EDUC Deleted  
4514 Specific Learning Disabilities, EDUC  
4780 Professional Development II, EDUC  
4707 Teaching Writing, EDUC 4518 Behavior  
Problems and Their Management and EDUC  
4517 Communication Disorders

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

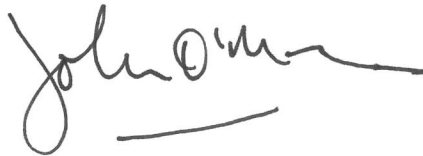
Faculty:

Faculty of Education

Date:

January 17, 2011

Signature of Dean

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