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No

Yes

Request for Calendar Change Form Tracking No: (Senate Secretary's Office use only) Date: 13/01/2011 To Secretary of Senate From Name(Dean): Faculty Dr. Gillian Siddall Social Sciences & Humanities Department the change relates to Visual Arts Contact Person Professor Mark Nisenholt 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 Yes terms of their calendar change? 4 Г 2. Is a transition plan needed for student in progress? Yes No V 3. Are the proposed changes likely to affect student enrollment in your Yes No department/school/faculty? V 4. Are the proposed changes likely to affect student enrollment in other Yes No departments/schools/faculties at Lakehead University? V 5. Will the proposed changes require additional teaching space and/or Yes No teaching staff and/or equipment and/or other resources? V 6 Will the proposed changes affect existing teaching loads within your Yes No department/school/faculty? П V 7. Will the proposed changes increase demand for teaching support Yes No services such as the library, computing services and technical staff? V 8. Will the proposed change require direct or in-kind support from outside Yes No the academic unit? V 9. Do the proposed changes include change in course(s) which is/are Yes No required core course(s) for a major?

10. Do the proposed changes include a change in course which is

service/required course(s) in another program	?		V		
11. Do the proposed changes include change in open elective available to any student in any p		Yes	No V		
12. Do the proposed changes include change in elective in a major i.e. restricted to students in		Yes	No		
Signatures: Date approved by faculty council 06/01/2011					
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Section 1					
Description of the Proposed Calendar Change:					
Addition of half-credit studio-orientated course in art fundamentals					
Rationale of the Proposed Calendar Change(s) (Corresponding to Section 2 where required)	:				
This course is intended to satisfy, (in part), the , (required or recommended), visual arts studio course for education majors, and to dovetail with a complementary half course from the Music Department. Not intended for visual arts majors.					
I					

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
	Fundamentals of Art 1 - course number 0X10 this half course will provide the student with
	studio experience of the fundamental components necessary for the creation of visual art. Students will engage in projects and assignments that examine the importance of shape making, line and contour, colour and tonal relationships, composition, perspective and spatial illusion, and other aspects of 2 dimensional and 3 dimensional
	art. Students will also be introduced to the work of prominent and influential artists as they relate to the projects at hand. Lecture/studio 4 hours per week. Project time as required. Note: Restricted to Education majors.

Section 3			
The Faculty(ies) affected by the proposed o	calendar change		
Education			
I have been consulted regarding the a			inderstand the
academic and budgetary implication o	n my Dept./Schoo	i/Faculty.	
I agree to this calendar change proposal	Yes 🗸	No 🗆	
r agree to this calculate thange proposal	1000		
Name:			
Faculty:			
Date:	Signature of Dean	0-1	(Llay
Jan 13, 204	Signature of Dean	Jelan	1,,,,,,,