

LAKEHEAD UNIVERSITY

FACULTY OF SOCIAL SCIENCES AND HUMANITIES LANGUAGES

CHANGE REQUEST REPORT

Change Request Tracking Number: 2016-SOC-5817

Title of Change Request: Programs-Discontinuing-UG-Languages-Delete certificates

Status of Change Request: In Workflow

Change Request can be split

CHANGE REQUEST CONTENTS

#	Туре	Title
1.	Discontinued Program	Certificate of Finnish Proficiency
2.	Discontinued Program	Certificate of Italian Proficiency
3.	Discontinued Program	Certificate of Spanish Proficiency

CHANGE REQUEST HISTORY

Workflow Stage	Action Type	Action Taken By	Change Made	Action Rationale	Date
Initiator	Approved	Languages Department	Yes	Submitted to workflow	07/25/2016, 04:00 PM
Submission Review (Academic & Curriculum Development Coordinator)	Approved	Submission Review	No	Approved	07/26/2016, 02:46 PM

SUPPORTING DOCUMENTS

None.

SUPPORTING DOCUMENTS AUDIT TRAIL

None.

CHANGE REQUEST COMMENTS

None.

1.	Discontinued Program	Certificate of Finnish Proficiency
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DEGREE DETAILS

REMOVE CERTIFICATE FROM CALENDAR FORM

Title of Certificate:	Certificate of Finnish Proficiency
Description of the Certificate:	Finnish Proficiency Cert
Requirements:	

ADMISSION REQUIREMENTS

This certificate, consisting of three full course equivalents, is open to new and current Lakehead University students. Those students interested in the certificate should consult with the Chair of the Department. Students may register in the certificate only. Applicants must meet Lakehead University's general admission requirements. Students must have Grade 12 U

English or equivalent before beginning the program.

ACADEMIC REGULATIONS

1. In order for a Certificate to be granted a student must successfully complete all three FCEs with a minimum overall average of 70%.

COURSES

- (a) Finnish 1000
- (b) Finnish 2001 and Finnish 2401

The following is information for Committee Review:

Certificate Code : CERT.FINN

Calendar Start Term.: 2015-16

Calendar End Term. When is the last calendar year this 2016-17 should be displayed?:

Pedagogical rationale for this proposal. Why are you submitting this request?:

Academic Level: Undergraduate

Faculty or Institution Unit:

· Lakehead University

Department Name: Languages

Certificate Type: Credit Certificate

Learning Outcomes: Learn to understand others and express themselves in a basic spoken and written Finnish, Spanish or Italian depending on the certificate. Upon successful completion of the courses, students will reach level A2 of CEFR.

Include clear rationale for Minors in Finnish and Spanish are not popular as students take the specific course a first year course and don't pursue in second and third year. requirements. If courses The Certificate of French Proficiency is very popular are offered by other therefore, we would like to offer a Certificate of Finnish academic units, attach Proficiency and of Spanish Proficiency as it seems more confirmation of their approachable for students as no third year is required (1 FCE support: language course year 1 + 1 FCE language course year 2 + 1 FCE culture and civilization course year 2). It would also be very useful for students who would go on exchange. The second year culture and civilization course will be given in English (no requirement) so any students could take it, bringing more students into the course. Include a clear rationale for the proposed certificate program and indicate how this certificate is likely to advance the university's Strategic Plan. Its alignment with the home Academic Unit's or Academic Units' goals/objectives should be included here as well.

Student Enrolment: Indicate who this program is open to No restrictions.

and if there are any restrictions:

Is this program offered by other institutions? If yes, No and if possible, include weblinks:

Length of the program program:

(e.g., 3-terms): Indicate
if there is a maximum time
and/or sequencing for
students to complete this

Mode(s) of Delivery. Select all that apply .:

Rationale for Modes of Every language course is delivered with lectures and labs.

Location and Rationale (e.g. specify on-campus or on-campus off-campus):

The following is information for Senate Budget Committee Consideration:

NOTE: Complete each section and provide full explanations for both "yes" and "no" answers. This will not be displayed in the calendar but will be used by the Senate Budget Committee when considering approval of this proposal. The creator of this proposal may be asked to attend a committee meeting to discuss this proposal. Contact the Chair of the Senate Budget Committee if you wish to discuss any of the questions below.

Will this program impact same faculty/unit?:

student enrolment in This certificate will not impact student enrolment in another another program within the program in the same faculty.

Will this program impact different faculty/unit?:

student enrolment in This certificate will not impact student enrolment in anothe another program in a rprogram in a different faculty.

Will additional resources equipment, etc.)?:

be required (space, staff, No additional resources will be required.

How will this impact within this faculty/unit?:

existing teaching loads This certificate will not impact existing teaching loads.

What is the impact on the services (library, services. computers, staff, etc.)?:

demand for teaching support There will be no increased demand for teaching support

Will this require outside support? If yes, please No outside support will be required.

2. Discontinued Program

Certificate of Italian Proficiency

DEGREE DETAILS

REMOVE CERTIFICATE FROM CALENDAR FORM

Title of Certificate: Certificate of Italian Proficiency

Description of the Italian Proficiency Cert

Requirements:

ADMISSION REQUIREMENTS

This certificate, consisting of three full course equivalents, is open to new and current Lakehead University students. Those students interested in the certificate should consult with the Chair of the Department. Students may register in the certificate only. Applicants must meet Lakehead University's general admission requirements. Students must have Grade 12 U English or equivalent before beginning the program.

ACADEMIC REGULATIONS

1. In order for a Certificate to be granted a student must successfully complete all three FCEs with a minimum overall average of 70%.

COURSES

- (a) Italian 1010 and Italian 1030
- (b) Italian 2001, Italian 2510 and Italian 2530

The following is information for Committee Review:

Certificate Code : CERT.ITAL

Calendar Start Term.: 2015-16

Calendar End Term. When is the last calendar year this 2016-17

should be displayed?:

Pedagogical rationale for this proposal. Why are you submitting this request?:

Academic Level: Undergraduate

Faculty or Institution

Unit:

Lakehead University

Department Name: Languages

Certificate Type: Credit Certificate

Learning Outcomes: Learn to understand others and express themselves in a basic spoken and written Finnish, Spanish or Italian depending on the certificate. Upon successful completion of the courses, students will reach level A2 of CEFR.

Include clear rationale for support:

the specific course Rationale not included. Include a clear rationale for the requirements. If courses proposed certificate program and indicate how this certificate are offered by other is likely to advance the university's Strategic Plan. Its academic units, attach alignment with the home Academic Unit's or Academic Units' confirmation of their goals/objectives should be included here as well.

Student Enrolment: Indicate who this program is open to No restrictions. and if there are any restrictions:

Is this program offered by other institutions? If yes, No and if possible, include weblinks:

Length of the program program:

(e.g., 3-terms): Indicate 6 terms: -the certificate should be completed in the same time if there is a maximum time and/or sequencing for students to complete this

Mode(s) of Delivery. Select all that apply.:

Rationale for Modes of Every language course is delivered with lectures and labs.

Location and Rationale (e.g. specify on-campus or on-campus off-campus):

The following is information for Senate Budget Committee Consideration:

NOTE: Complete each section and provide full explanations for both "yes" and "no" answers. This will not be displayed in the calendar but will be used by the Senate Budget Committee when considering approval of this proposal. The creator of this proposal may be asked to attend a committee meeting to discuss this proposal. Contact the Chair of the Senate Budget Committee if you wish to discuss any of the questions below.

Will this program impact another program within the program in the same faculty. same faculty/unit?:

student enrolment in This certificate will not impact student enrolment in another

Will this program impact different faculty/unit?:

student enrolment in This certificate will not impact student enrolment in another another program in a program in a different faculty.

Will additional resources equipment, etc.)?:

be required (space, staff, No additional resources will be required.

How will this impact within this faculty/unit?:

existing teaching loads This certificate will not impact existing teaching loads.

What is the impact on the services (library, services. computers, staff, etc.)?:

demand for teaching support There will be no increased demand for teaching support

Will this require outside support? If yes, please outline the amount and No outside support will be required. timing of the funding:

3. Discontinued Program

Certificate of Spanish Proficiency

DEGREE DETAILS

REMOVE CERTIFICATE FROM CALENDAR FORM

Title of Certificate: Certificate of Spanish Proficiency

Description of the Spanish Proficiency Cert

Requirements:

ADMISSION REQUIREMENTS

This certificate, consisting of three full course equivalents, is open to new and current Lakehead University students. Those students interested in the certificate should consult with the Chair of the Department. Students may register in the certificate only. Applicants must meet Lakehead University's general admission requirements. Students must have Grade 12 U English or equivalent before beginning the program.

ACADEMIC REGULATIONS

1. In order for a Certificate to be granted a student must successfully complete all three FCEs with a minimum overall average of 70%.

COURSES

- (a) Spanish 1000
- (b) Spanish 2001, Spanish 2431 and Spanish 2451

The following is information for Committee Review:

Certificate Code : CERT.SPAN

Calendar Start Term.: 2015-16

Calendar End Term. When is the last calendar year this 2016-17 should be displayed?:

Pedagogical rationale for this proposal. Why are you submitting this request?:

Academic Level: Undergraduate

Faculty or Institution

Unit:

Lakehead University

Department Name: Languages

Certificate Type: Credit Certificate

Learning Outcomes: Learn to understand others and express themselves in a basic spoken and written Finnish, Spanish or Italian depending on the certificate. Upon successful completion of the courses, students will reach level A2 of CEFR.

Include clear rationale for Minors in Finnish and Spanish are not popular as students take the specific course a first year course and don't pursue in second and third year. requirements. If courses The Certificate of French Proficiency is very popular are offered by other therefore, we would like to offer a Certificate of Finnish academic units, attach Proficiency and of Spanish Proficiency as it seems more confirmation of their approachable for students as no third year is required (1 FCE support: language course year 1 + 1 FCE language course year 2 + 1 FCE culture and civilization course year 2). It would also be very useful for students who would go on exchange. The second year culture and civilization course will be given in English (no requirement) so any students could take it, bringing more students into the course. Include a clear rationale for the proposed certificate program and indicate how this certificate is likely to advance the university's Strategic Plan. Its alignment with the home Academic Unit's or Academic Units' goals/objectives should be included here as well.

Student Enrolment: Indicate who this program is open to No restrictions. and if there are any restrictions:

Is this program offered by other institutions? If yes, and if possible, include weblinks:

Length of the program program:

(e.g., 3-terms): Indicate 6 terms -the certificate should be completed in the same time if there is a maximum time and/or sequencing for as the Major. -For students not registered in a Major, the students to complete this

Mode(s) of Delivery. Select all that apply.:

Delivery:

Rationale for Modes of Every language course is delivered with lectures and labs.

Location and Rationale (e.g. specify on-campus or on-campus off-campus):

The following is information for Senate Budget Committee Consideration:

NOTE: Complete each section and provide full explanations for both "yes" and "no" answers. This will not be displayed in the calendar but will be used by the Senate Budget Committee when considering approval of this proposal. The creator of this proposal may be asked to attend a committee meeting to discuss this proposal. Contact the Chair of the Senate Budget Committee if you wish to discuss any of the questions below.

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Will this program impact different faculty/unit?:

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Will additional resources equipment, etc.)?:

be required (space, staff, No additional resources will be required.

How will this impact within this faculty/unit?:

existing teaching loads This certificate will not impact existing teaching loads.

What is the impact on the services (library, services. computers, staff, etc.)?:

demand for teaching support There will be no increased demand for teaching support

Will this require outside support? If yes, please
 outline the amount and
No outside support will be required. timing of the funding: