



**LAKEHEAD UNIVERSITY**  
**FACULTY OF SOCIAL SCIENCES AND HUMANITIES**  
**CHANGE REQUEST REPORT**

**Change Request Tracking Number:** 2025-SOC-9152

**Title of Change Request:** ORPT Requirement Updates

**Status of Change Request:** In Workflow

**Change Request can't be split**

**CHANGE REQUEST CONTENTS**

#	Type	Title

1.	New Version of a Degree	Honours Bachelor of Outdoor Recreation (with Concentration in Nature-Based Therapeutic Recreation) – Transfer – Confederation College Recreation Therapy Diploma
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**CHANGE REQUEST HISTORY**

Workflow Stage	Action Type	Action Taken By	Change Made	Action Rationale	Date
Initiator	Approved	Lori Kapush	Yes	Submitted to workflow	11/03/2025, 08:51 AM
Submission Review (Manager of Curriculum Development)	Relegated	Submission Review	No	Please update title, rationale and location. Thank you	11/03/2025, 04:31 PM
Initiator	Approved	Lori Kapush	Yes	I don't know what you are asking me to change.	11/06/2025, 02:04 PM
Submission Review (Manager of Curriculum Development)	Relegated	Submission Review	No	hello, please see email. thank you!	11/13/2025, 08:55 AM
Initiator	Approved	Lori Kapush	Yes	changes submitted	11/13/2025, 11:09 AM
Submission Review (Manager of Curriculum Development)	Approved	Submission Review	No	ok to move forward	01/15/2026, 10:08 AM

**SUPPORTING DOCUMENTS**

None.

**SUPPORTING DOCUMENTS AUDIT TRAIL**

None.

**CHANGE REQUEST COMMENTS**

None.

1.	New Version of a Degree	Honours Bachelor of Outdoor Recreation (with Concentration in Nature-Based Therapeutic Recreation) – Transfer – Confederation College Recreation Therapy Diploma
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**DEGREE DETAILS****MODIFY A PROGRAM FORM (less significant changes).**

NOTE TO USER about this form:

This "Modify a Program" form is used to make less significant modifications to a program. If you plan to make a major modification to a program, please use the form "Major Modification to Program". Visit this link to learn more about Major Modifications

**The following is information that is displayed in the University Calendar**

**Location:**

- Thunder Bay Campus

**Title of Program:** Honours Bachelor of Outdoor Recreation (with Concentration in Nature-Based Therapeutic Recreation) – Transfer – Confederation College Recreation Therapy Diploma

**Program Requirements:****First Year:**

- (a) Outdoor Recreation 1070, 1150, 1310, 2010, 2350
- (b) Biology 2011 or 2035
- (c) Psychology 1111 and 1112
- (d) One of: Anthropology 1032 and 1034; Economics 1010 and 1011; Geography 1150 and 1190; Indigenous Learning 1100; Political Science 1100; Sociology 1100

**Second Year:**

- (a) Outdoor Recreation 2011, 3050, 3312, 3370, 3610
- (b) Psychology 3017 and Psychology 3018
- (c) Two half FCEs in Outdoor Recreation at the third year level
- (d) One-half FCE elective at the second year level or higher

**Third Year:**

- (a) Outdoor Recreation 4370, 4611, 4911
- (b) Psychology 3114 and Psychology 3115
- (c) One FCE electives at the second year level or higher
- (d) One FCE in Outdoor Recreation at the fourth year level
- (e) One half FCE in Outdoor Recreation at the third or fourth year level

Note: The Indigenous Content Requirement is met by students taking Outdoor Recreation 1150 in the first year of the program.

**The following is information for Committee Review**

**Program Code:** HB0R.NBTR.TRF

**Calendar Start Term. When** 20252026–2627  
**this change should be displayed in the Calendar:**

**Calendar End Term. When is the last calendar year this should be displayed?:** No Specified End Date Use No Specified End date unless you are removing it from the calendar.

**Faculty or Institution Unit:**

- Lakehead University
- Faculty of Social Sciences and Humanities

**Academic Level:** Undergraduate

**Total number of credits for the degree:** 15.00

**Transcript Title of Program:** Honours Bachelor of Outdoor Recreation (with Concentration in Nature-Based Therapeutic Recreation) – Transfer – Confederation College Recreation Therapy Diploma Block Transfer Pathway

**Degree Type:** HB0R

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

**The following is information for Senate Budget Committee Consideration**

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**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** no  
**student enrolment in**  
**another program within the**  
**same faculty/unit?:**

**Will this program impact** no  
**student enrolment in**  
**another program in a**  
**different faculty/unit?:**

**Will additional resources** no  
**be required (space, staff,**  
**equipment, etc.)?:**

**How will this impact** none  
**existing teaching loads**  
**within this faculty/unit?:**

**What is the impact on the** None  
**demand for teaching**  
**support services (library,**  
**computers, staff, etc.)?:**

**Will this require outside** No  
**support? If yes, please**  
**outline the amount and**  
**timing of the funding:**