UNIVERSITY Board of Graduate Studies – University of Guelph Senate

## **Course Change Form**

Course changes include revisions to department responsibility, course code, title, calendar description, prerequisites, course restrictions (including instructor consent), credit weighting, grade scheme and incorporating course content from a deleted course. If the course change is due to credit weight change or the deletion of another course, please provide a course outline, which justifies the credit weight change or includes the content/material for the deleted course. Course changes are subject to Division Committee, Graduate Programs and Policy Committee, and Board of Graduate Studies approval.

Department/School/Program responsible for course:				
Course Code and No. (i.e. UNIV*6000) :	Proposed Course Code and No.:			
Current Title:				
				Short Title (30 characters max) (This is the title that will appear on the student's official transcript):
Semester(s) Offering: F W S U				
Do you wish for the semester designation to be printed	in the Calendar? Yes No			
Placement in calendar (indicate subheading under wh	ich course is to be listed if applicable):			
Prerequisite(s):				
Mandatory Co-requisite(s):				
Other restrictions:				
Lecture Hours/Week: Laboratory or <sup>-</sup>	Tutorial Hours/Week:			
Offered by distance: Yes No				
Total Contact Hours/Week: Total S	Student Time & Effort on Course/Week:			
Scheduling: Annually Alternate Years				

Is this course cross-listed with other courses?	Yes No
Please indicate which level of courses are cross-listed below.	
Undergraduate & graduate:	<b>Restriction</b> : Credit may be obtained for only one of the courses
List courses:	Yes
Masters & Masters:	
List courses:	Yes No
Masters & doctoral:	
List courses:	Yes No
In instances of different degrees, please describe the master's or	r doctoral level component that differentiates the two
Current Credits: Proposed Credits: Credit Guidelines: Choose only one. If proposed credits do not conform to guid	elines, attach a full explanation, 0.0 (Seminar-type courses, unless

Credit Guidelines: Choose only one. If proposed credits do not conform to guidelines, attach a full explanation. 0.0 (Seminar-type courses, unless a higher rating is justified and approved) 0.25 (Half-semester courses, including six-week courses, unless contact hours & workload is doubled in the six-week period) 0.5 (Semester courses, usually given throughout one semester) (student time & effort on task = approximately 10-12 hours per week) 1.0 (Double courses, including two semester courses, typically major paper courses)

Instructor's signature required: Yes No

Designated as a two-semester course with students registering in each semester:	Students rece	ive INP (i	in progress) at
the end of the first semester and a grade at the end of the second semester.	Yes	No	

Designated as a multiple-semester course: Is this course designed to require more than one semester for completion, with students registering in each semester with one grade at the end? Yes No

Maximum number of times a student may take this course:	Once Only Twice Only Unlimited
Current Grade Scheme: Numeric SAT/UNS (reserve	ed for seminar or practical courses only)
Proposed Grade Scheme: Numeric SAT/UNS (reser	rved for seminar or practical courses only)

**Proposed Calendar Description:** (*Please ensure that the course description is grammatically correct – i.e. is formatted in completed sentences*) 45 words or less.

**Proposed Revisions and Reasons for Revisions:** (Brief rational and point form is acceptable for this section). Include the impact of this course change on associated learning outcomes.

Please attach a course outline reflecting proposed changes.

Signature Approval of Graduate Program Coordinator: \_\_\_\_\_\_

Signature Approval of Chair/Director: \_\_\_\_\_

Date Approved: \_\_\_\_\_