

New Course Request

Approval Level: Deans’ Council

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| Requestor Name/Title: |  |
| Consultations: | (LXD, Registrar, Other Centres, Business Analyst, etc.) |
| Brief justification: |  |

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| **MOTION** |
| I move THAT Deans’ Council approve new course XXX-XXXX as outlined, effective July 1, XXXX. |

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| **COURSE INFORMATION** | | | |
| Course ID |  | | |
| Course Title (Max. 30 Char.) |  | | |
| Couse Title Long (40) |  | | |
| Program course belongs to |  | | |
| Centre course belongs to |  | | |
| Course Credits |  | | |
| Total Instructional Hours Per Week (based on 15 week term) |  | Instructional Hours/Week |  |
| Lab Hours/Week |  |
| Tutorial Hours/Week |  |
| WIL Total Hours |  | WIL Hours Per Week |  |
| Grading Type |  | | |
| Calendar Description  (Max. 80 words) |  | | |
| Course Outcomes |  | | |
| PLA Eligibility | Yes/No | | |
| Supplemental Exam Eligibility | Yes/No | | |
| Applied Research Component | Yes/No | | |
| Course Term Offering | List all that apply | | |
| Pre-requisites |  | | |
| Co-requisites |  | | |
| Replacing Existing Course | Yes/No | | |
| Equivalent to Existing Course |  | | |
| Course being replaced: |  | | |
| De-activation Date: |  | | |

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| **FINANCIAL INFORMATION** | **COMPLETED BY BUSINESS ANALYST, Name:** |
| Required Location (Main GL) | 10 000-XXXXX-44000 |
| Optional Location (DL GL) | 10 000-XXXXX-44200 |
| Tuition Rate Flag (e.g. GG) |  |
| Academic Fee Required? | Yes/No (If yes, please attach a completed [Academic Fee Form](https://lethbridgecollege.ca/index.php/document-centre/forms/financial-services/academic-fee-request-form)) |

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| **IMPACTS** | |
| Budget Impact on Program |  |
| Employees/HR |  |
| Professional Development |  |
| Information Technology |  |
| Space Requirements |  |
| Equipment/Materials |  |
| Course Development |  |
| Student Affairs |  |
| Marketing Communications |  |
| Other Centres/Programs |  |

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| Dean/Designate Signature: |  |
| Print Name: |  |
| Date: |  |