

Program Change Request

Approval Level:

Part 2- Minor Changes: Deans’ Council

Part 3 - Major Changes: Deans’ Council> Academic Council> Board of Governors > Advanced Ed.

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| Requestor Name/Title:  |  |
| Consultations:  | (IPR Planning Analyst, Learning Experience Designer, Registrar, etc.)  |

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| **PROGRAM INFORMATION** |
| Program Name |  |
| Centre |  |
| Credential Type | Certificate/Diploma/Degree |

PART 1 – Justification and Impact

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| **JUSTIFICATION (Copied from the PAPRS Proposal)** |
| 1. Provide a rationale for the proposed changes. |
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| 2. Describe anticipated impacts on active students, and plans to reduce any such impacts.  |
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| 3. Where appropriate, provide evidence of consultation with external |
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| **IMPACTS** |
| Budget |  |
| Employees/HR |  |
| Professional Development |  |
| Information Technology |  |
| Space Requirements |  |
| Equipment/Materials |  |
| Course Development |  |
| Student Affairs |  |
| Marketing Communications |  |
| Other Centres/Programs |  |
| Existing Transfer Agreements |  |

PART 2 – Level 1 Program Changes

Approval Level: Deans’ Council

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| **MOTION EXAMPLE:** |
| I move THAT Deans’ Council Approve the changes to the XXXXXXXX Program as outlined in the attachment resulting in no change to the term or total program credits, effective July 1, XXXX., effective July 1, XXXX |

*Only complete the section where change is proposed.*

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| **PROPOSED CHANGE** | **REQUESTED CHANGE** |
| Program Calendar Description |  |
| Close/Open Admissions |  |
| Available Admissions |  |
| Admission Requirements |  |
| Academic Requirements |  |
| Non-Academic Requirements |  |
| Total Learning Hours |  |
| Work Integrated Learning (WIL) Requirements |  |

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| **MINOR CURRICULUM CHANGES (NO CHANGE TO CREDITS):** |
| CURRENT COURSE INFORMATION | NEW COURSE INFORMATION |
| ID | NAME | YEAR/TERM | CREDITS | ID | NAME | YEAR/TERM | CREDITS |
|  |  |  |  |  |  |  |  |
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| **ADDITION/REMOVAL OF AN APPROVED ELECTIVE** |
| COURSE INFORMATION |
| COURSE ID | NAME | YEAR/TERM | CREDITS | ADD/REMOVE | EFFECTIVE DATE |
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|  |  |  |  |  |  |

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| **COURSE ACTIVATION/DEACTIVATION** |
| COURSE INFORMATION |
| COURSE ID | NAME | YEAR/TERM | CREDITS | ACTIVATE/DEACTIVATE | EFFECTIVE DATE | PROGRAMS DELIVERED TO: |
|  |  |  |  |  |  |  |
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| **SIGNATURE** |
| Dean/Designate Signature: |  |
| Print Name:  |  |
| Date: |  |

If no further changes you are done…

PART 3 – Level 2 Program Changes

Approval Level: Deans’ Council > Academic Council > Board of Governors > Alberta Advanced Education

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| **MOTION EXAMPLE:** |
| I move THAT Academic Council approve changes to the XXXXXXXX Program, as outlined in the attachment, effective July 1, XXXX, and provide recommendation for approval the Lethbridge College Board of Governors and Alberta Advanced Education. |

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| **PROPOSED CHANGE** | **REQUESTED CHANGE** |
| Program Name Change |  |
| Total Program Credits |  |
| Change to Credits per Year | Describe change, fill out table below |
| Program Outcomes |  |
| Program Suspension  | Effective Date: June 30, XXXX |
| Program Reactivation  | Effective Date: July 1, XXXX |
| Program Termination | Effective Date: June 30, XXXX |
| Budget Changes | GL Changes |

Complete All Curriculum below:

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| **MAJOR CURRICULUM CHANGES (CHANGE TO CREDITS)** |
| CURRENT COURSE INFORMATION | NEW COURSE INFORMATION |
| ID | NAME | YEAR/TERM | CREDITS | ID | NAME | YEAR/TERM | CREDITS |
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| **PROGRAM CREDITS** |
| TERM | CREDITS |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |
|  | TOTAL Program Credits:  |

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| **SIGNATURE** |
| Dean/Designate Signature: |  |
| Type Name:  |  |
| Date: |  |
| Provost & VPA Signature: |  |
| Type Name: |  |
| Date: |  |