



NEW and REVISED NON-DEGREE CREDIT PROGRAM

Development and Consultation Control Sheet

New Program _____ Revised Program _____

Name of Program: _____

Members of the Program Curriculum Development/Revision Committee:

Name:

Faculty/Department:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Note: All New and Revised curriculum guidelines for individual courses must follow the consultation and approval process outlined in the *Curriculum Development and Approval Policy*.

(Please read the definitions of Major and Minor revisions in the policy)

INSTRUCTIONS AND CHECKLIST

New or Revised Non-Degree Program Consultation

New Programs: Please follow the steps below in the order indicated:

1. Attach full program proposal and submit to VPAC for advice and approval.
2. Submit VPAC approved program proposals to appropriate EDCO subcommittees and Education Council for approval. (See *Program Approval Policy for New and Revised Non-Degree Credit Programs*).

Revised Programs: Please follow the steps below in the order indicated:

1. Attach a FEC/DEC reviewed (and Dean/Associate Dean/Director approved) summary of the nature/scope of proposed program revisions. Include detailed rationale for revisions and effective date of implementation.
2. Submit to VPAC for approval **if there are resource implications**.
3. Submit to appropriate EDCO sub committees for review and to Education Council for approval. (See *Program Approval Policy for New and Revised Non-Degree Credit Programs*).

SENDERS:

Circulate for comment a minimum of ten (10) business days before the response due date specified below.

DATE SENT: _____ **RESPONSE DUE DATE:** _____

RESPONDERS:

****It is the responsibility of the receiving department to provide response before the response due date specified above. No response by the due date indicates that you have no comment.**

DATE RECEIVED: _____

Consultation regarding the program proposal/revisions were held with the following groups (indicate n/a where appropriate).

Consultation means that electronic and/or in person discussion has occurred. Consulted groups/individuals will provide feedback to program/course developers. If concerns arise that cannot be resolved, consulted groups will indicate so (✓) and attach their written concerns to this control sheet. Consulted groups or individuals, other than Associated Studies Partners, do not have the authority to approve or veto proposals.

<u>Group Consulted</u>	<u>Contact Person's Signature or Email (Attach)</u>	<u>Date</u>	<u>Concerns (✓)</u>
1. Originating Department _____	_____	_____	_____
2. Associated Studies Partners (list all)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

<u>Group Consulted</u>	<u>Contact Person's Signature or Email (Attach)</u>	<u>Date</u>	<u>Concerns (✓)</u>
3. Interdisciplinary partners (list all)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
4. Other Departments interested or affected (list all)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
5. Admissions Standards and Language Competency Committee (<i>All new or revised admissions requirements</i>)	_____	_____	_____
6. Learning Resources (Library)	_____	_____	_____
7. Registrar's Office	_____	_____	_____
8. Centre for Educational & Information Technology (CEIT)	_____	_____	_____
9. Facilities	_____	_____	_____
10. Financial Aid Office	_____	_____	_____
11. Centre for Students with Disabilities	_____	_____	_____
12. Aboriginal Student Services Coordinator	_____	_____	_____
13. Finance Department	_____	_____	_____

14. Other (*specify*)

Approvals of New or Revised Program

<u>Approving Body</u>	<u>Signature (Confirms Approval)</u>	<u>Date</u>
FEC/DEC Chair or designate	_____	_____
Dean/Associate Dean/Director or designate	_____	_____
VPAC Chair or designate (as appropriate)	_____	_____
EDCO Chair or designate	_____	_____