

AC-04-10
New Course Proposal Form

10. Schedule Type(s):



INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE		
<i>To be completed by the Faculty</i> Slot Course: Yes No Thesis Component: Yes No	<i>To be completed by ARR</i> CIP Code <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<i>For Continuing Education Use</i> CE Admin. Unit : <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> CE Non-Grant Courses: <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> Flat Rate: CdnFlat Rate: <input type="checkbox"/> Yes <input type="checkbox"/> N/A

21. Approvals:						
Routing Sequence	Departmental Meeting	Departmental Chair	Other Faculty	Curric/Academic Committee	Faculty	SCTP
Name	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Signature	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Date	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Departmental Contact Person (name/phone/email)						