Appendix IV

SCHOOL OF GRADUATE STUDIES
GRADUATE DEGREE PROGRAM REVISION
FOR GRADUATE STUDIES AND RESEARCH COMMITTEE/FACULTY BOARD APPROVAL

DEGREE PROGRAM NAME: _____

Degree program revisions should be submitted whenever a course addition, course deletion or course revision affects the graduate degree program requirements OR whenever a minor change to the current degree program requirements is proposed.

1. Description of Change: Indicate the degree program and/or SGS Calendar section to be revised.

2. Rationale: Provide a detailed justification explaining the proposed change(s).

3. Calendar copy: This is the text that will appear in the SGS Calendar. Provide the revised text with revisions **in bold**.

4. Timing: Please provide dates when these changes will come into effect. Describe how you will ensure that students who began their plans before this change will be allowed to continue in their plans (grandparenting arrangements).

5. Resources: If these changes will affect specific resource requirements in terms of rooms, equipment, computers, TAs, etc., please provide details. Will any new funds be required for these changes? If so, how will these costs be covered? Please include any relevant correspondence.

Submission Contact: Name: _____Marlene Sayers_____

Internal Phone # _____74251_____

E-mail: _____marlene.sayers@queensu.ca_____

EMAIL the completed forms and any attachments to the Graduate Studies and Research Committee secretary, on or before the deadline for agenda items for the next Committee meeting.

FOR SGS OFFICE USE ONLY:

Date of approval by appropriate Council/Committee: _____

Date of approval at Graduate Studies Executive Council: _____