

**APPENDIX 5: GRADUATE COURSE DELETION**  
**FACULTY OF ARTS AND SCIENCE/SCHOOL OF GRADUATE STUDIES**  
**Curriculum Submission**

**DEPARTMENT OR PROGRAM:**

**COURSE CODE/NUMBER:**

Submission Contact Name:

Phone #:

Email:

Date:

Signature of Department Head/Program Director: \_\_\_\_\_

Signature of Coordinator of Graduate Studies: \_\_\_\_\_

**Submission to which lead Council?                      ARTS                      SCIENCE**

**\*\* If multiple courses are to be deleted for the same reason(s) and impact(s), you may list multiple deletions on this form. Otherwise, submit a separate form for each course**

1.     Course number and title: Note that this number may not be reused for five years.
  
2.     Reason for deletion: Provide a detailed rationale for this deletion, eg. staffing, resources, archaism, replacement by new course(s), etc.
  
3.     Impact inside of department or program: How will this deletion affect the Department or Program?
  
4.     Impact outside of department or programs: Will this deletion have any impact on programs offered by other Graduate Departments or Programs and/or students in other Graduate Departments or Programs? If so, please indicate the impact and indicate which departments(s) or program(s) have been contacted **and include copies of relevant correspondence.**

FOR OFFICE USE ONLY:

Date of approval by FASGC: \_\_\_\_\_

Review by Faculty of Arts and Science: \_\_\_\_\_

Date of approval at GSEC: \_\_\_\_\_