APPENDIX 1

School of Graduate Studies

NEW GRADUATE COURSE FOR FACULTY OF HEALTH SCIENCES GRADUATE COUNCIL APPROVAL

GRADUATE PROGRAM:

For EACH new course, please complete the entire form.

Insert the proposed Calendar description of the new course in the box below, and delete the example provided.

EXAMPLE

<table>
<thead>
<tr>
<th>(1a)</th>
<th>(2)</th>
<th>(1b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>ECON-853*/3.0</td>
<td>Applied Econometrics</td>
<td></td>
</tr>
<tr>
<td>This course is an introduction to graduate level time series econometrics. The goal of the course is to provide a foundation in core time series methods that will permit students to undertake serious empirical work or pursue more advanced theoretical modeling. (3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PREREQUISITE: ECON-852* or equivalent. (4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXCLUSION: ECON-953* (5)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Course number (1a) and title (1b): The number chosen for this course should not have been used in the past 5 years. The asterisk * is used to denote a term-length graduate course. In order to fit on the student transcript, the course title must be no longer than 30 characters, including spaces.

2. Weight (e.g. 1.5 credit units, 3.0 credit units, 6.0 credit units, etc.): The course weight must be consistent with the course content.

3. Calendar description: This is the description that will appear in the School of Graduate Studies Calendar. The maximum length for a Calendar description is 350 characters (3a). Remember to include any cost recovery fees that will be borne by the student (3b). If none, omit.

4. Prerequisites: Please list prerequisites; if none, omit.

5. Exclusions: List courses with sufficient content overlap, not only in your plan, but also in other plans. It is the responsibility of the department creating a new course to contact other departments that may offer courses with similar content in order to make this assessment. If none, omit.

Provide the following detailed information for each new course:

6. Expanded Course Description: Attach a detailed course description, expanding on course content.
Include potential readings, texts, instructional methods (i.e. lectures, seminars, etc.) and student evaluation. Explain how this course will fit into the Program’s overall program requirements. Is this course intended as a requirement, an option or an elective?

7. Impact (if any) on other programs: If the new course will have any impact on programs offered by other Programs, please indicate which programs may be affected by this new course, i.e., the course could be included in another concentration or the course content might overlap with courses offered by another program. Please indicate which Graduate Program(s) have been contacted.

8. Schedule: Will this course be offered regularly? Annually? In alternate years? When will it first be offered?

9. Staffing: Provide faculty/staff information for the coming year and foreseeable future.

10. Resources: Provide details of specific resource requirements in terms of rooms, equipment, computers, etc.

11. Enrolment: Indicate the anticipated enrolment in this course.

12. Grading basis: Indicate if this course is graded (ie assigned a grade) or Pass/Fail.

13. Course component(s): What component(s) make up this course (enter Y for any that apply):

<table>
<thead>
<tr>
<th>Lecture</th>
<th>Seminar</th>
<th>Laboratories</th>
<th>Tutorials</th>
</tr>
</thead>
</table>

14. Program Approval: Provide the date that this course was approved at the Program level, if applicable: ________________________________

15. Submission Contact: Name: __________________________

| Internal Phone #: | Email: __________________________ |

16: EMAIL the completed form and any attachments to the FHSGC Administrative Assistant (copied to FHSGC Chair), on or before the deadline for agenda items for the next Committee meeting.

FOR OFFICE USE ONLY:

| Date of approval by FHSGC: ________________________________ |
| Date of approval at GSEC: ________________________________ |