

**APPENDIX 3
GRADUATE COURSE DELETION
FACULTY OF LAW GRADUATE COMMITTEE
SCHOOL OF GRADUATE STUDIES
Curriculum Submission**

COURSE CODE/NUMBER:

Submission Contact Name:

Phone #:

Email:

Date:

Signature of Associate Dean (Graduate Studies and Research): _____

**** For EACH course deletion, please complete the section above AND items 1 through 4.**

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: How will this deletion affect the department/program?

4. Impact outside of department: Will this deletion have any impact on programs offered by other Graduate Departments/Programs and/or students in other Graduate Departments/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 Faculty of Law Graduate Committee: _____

Date of approval at GSEC: _____