Curriculum Proposal Form

New/Change to Course/Program – Okanagan campus

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| Category**: 1 or 2** | | |
| Faculty/School: Faculty / School **Dept./Unit:** Unit  **Faculty/School Approval Date:** YYYYMMDD  **Effective Session:** 20XXW or S | | **Date:** YYYYMMDD  **Contact Person:** Dr. X  **Phone:** 250.807.XXXX  **Email:** XXX@ubc.ca |
| Type of Action: [delete other choices] New Course  Discontinuation of Course  Revision to Calendar Description  Revision to Vectors  Revision to Prerequisite  New Program  New Course Code  Other: | | |
| **Rationale:** [explain why type of action is needed (e.g. is the new course filling a gap? Is a new faculty member bringing expertise? Is the course content being updated?);  please provide context and rationale as intended audience is from various Faculties]  **TEXT** | | |
| **Proposed Academic Calendar Entry:** | **Draft Academic Calendar URL:**  **URL**  [URL from the draft Academic Calendar <http://www.calendar.ubc.ca/okanagan/proof/edit> – **not** the current, posted Academic Calendar.  **Note:** URL not required for individual courses.]  **Present Academic Calendar Entry:**  (Cut and paste from the draft Academic Calendar.) | |