**Acadia University Senate Curriculum Committee (Administration) 2023-2024  
Form 1: New Course Proposal**

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| Department or School: | Click or tap here to enter text. | |
| Presented to Faculty Council? | Choose an item. | |
| Date presented (or will be) to Faculty Council | | Click or tap to enter a date. |

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| **Proposed Course Information & Rationale** | | | |
| Course code - discipline & number (e.g. HIST 2223): | | Click or tap here to enter text. | |
| *Have you checked with the Registrar’s Office to confirm the proposed course code has not been used before?* | | | Choose an item. |
| Proposed course title: | Click or tap here to enter text. | | |
| Abbreviated title for transcripts (if needed): MAXIMUM 30 characters | Click or tap here to enter text. | | |
| Provide Calendar description for the course below. (MAXIMUM 60 words)  Click or tap here to enter text. | | | |
| Prerequisites: | Click or tap here to enter text. | | |
| Corequisites: | Click or tap here to enter text. | | |
| Antirequisites: | Click or tap here to enter text. | | |
| Requirement for a major? | Choose an item. | | |
| Open to non-majors? | Choose an item. | | |
| Can the course be repeated more than once for credit (e.g. special topics courses)? | | | Choose an item. |
| If you chose ‘Yes’, please explain.  Click or tap here to enter text. | | | |
| Provide a brief description of the course below (pedagogy, evaluation methods, text(s) and other resources to be used).  Click or tap here to enter text. | | | |
| Explain the rationale for proposing this course below. Please be specific.  Click or tap here to enter text. | | | |
| Is a course with similar content offered at other universities? | | | Choose an item. |
| If you chose ‘Yes’, at which universities, and at what level?  Click or tap here to enter text. | | | |

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| **Enrolment** | | |
| Estimated Enrolment: | Click or tap here to enter text. | |
| Will the enrolment be limited? | | Choose an item. |
| If yes, please explain how enrolment will be limited.  Click or tap here to enter text. | | |

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| **Course Deletions?** | |
| Are any courses being deleted in conjunction with the proposed addition of a course? | Choose an item.  If you chose ‘Yes’, please complete the corresponding Form 2 (Proposed Course Deletion) for each. |
| If you chose ‘No’, please provide justification for this imbalance.  Click or tap here to enter text. | |

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| **Anticipated Impacts & Consultations** | |
| Has the proposal been discussed with students of the department/school? | Choose an item. |
| If you chose ‘Yes’, to what extent and what was the response?  Click or tap here to enter text. | |
| Will the course be cross-listed or form part of a multidisciplinary program? | Choose an item. |
| Briefly outline the impact this course will have on other courses or programs within your unit and others.  Click or tap here to enter text. | |
| Has the proposal been discussed with other appropriate units? | Choose an item. |
| If you chose ‘Yes’, to what extent and what was the response?  Click or tap here to enter text. | |

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| **Teaching Resources & Course Offerings** | |
| Initially who will be teaching the course? | Click or tap here to enter text. |
| Indicate the academic sessions in which the course will usually be offered? | Fall/Winter  Intersession  Online (continuous intake)  Other: Click or tap here to enter text. |
| Frequency of offering: | Every year  Alternate years  Other: Click or tap here to enter text. |

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| **Library Resources (as applicable)** | |
| Have you consulted with the department’s library liaison regarding acquisition of materials for the proposed course? | Choose an item. |
| Provide a list of available materials in the library that would be suitable for use in this course.  Click or tap here to enter text. | |
| Provide a list of desirable materials for acquisition by the library.  Click or tap here to enter text. | |

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| **Technology Support (as applicable)** | |
| Have you consulted with Technology Services regarding technological support or acquisition of technology for this course? | Choose an item. |
| What technological resources or assistance, if any, will be required?  Click or tap here to enter text. | |

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| **Additional Information** |
| Please provide any additional information you feel may be useful to the Curriculum Committee in its deliberation below.  Click or tap here to enter text. |