



**PROPOSAL FORM  
COURSE CHANGE**

**Current Course Name, Code & Title:** \_\_\_\_\_

**Division/Program:** \_\_\_\_\_

**SUMMARY OF PROPOSED CHANGES**  
Attach current approved course description from the *Guide to Graduate/Undergraduate Programs*  
(available online on the NSCAD website)

**TITLE:** \_\_\_\_\_  
(NB: Please keep course titles to a maximum of 50 characters)

**LEVEL:** \_\_\_\_\_ **CREDITS:** \_\_\_\_\_ **TYPE:** ( )

**DESCRIPTION:**

**PREREQUISITES (Title & Code):** \_\_\_\_\_

*Information for use by Academic Council*

**Reason for Proposed Change:**

**Implication for Program (s):**

**Change Proposed by:** \_\_\_\_\_

**Proposed Implementation Date:** \_\_\_\_\_

|  |                                      |
|--|--------------------------------------|
| <b>Reviewed by Chairperson/Director:</b> | _____                                |
|  | Signature of Division Chair/Director |
| <b>Reviewed by Registrar:</b>            | _____                                |
|  | Signature of Registrar               |
| <b>Reviewed by Provost:</b>              | _____                                |
|  | Signature of Provost                 |

|                                   |                    |
|-----------------------------------|--------------------|
| <b>Academic Council's Action:</b> | _____              |
|                                   | <b>Date:</b> _____ |