**Major Program Modification**

[For program closures, removal of components (e.g. specializations), and for new pathways, please note that there are specific Word templates; please use the correct Word template in those cases. Curriculog contacts should reach out to CIQE if they are unclear which form to use on Curriculog to capture the information.]

*Changes to programs must be entered into Curriculog prior to Faculty Council. Please use this template to provide the information to your Curriculog contact.*

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| **Faculty**:  |
| **Undergraduate**: ☐ | **Graduate**: ☐ |

**Summary of the proposed change(s):** (Provide a brief point by point summary of the change)

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**Is a new course associated with this proposal? ☐ Yes ☐ No**

**List new courses, if applicable:**

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**Calendar Start Date:** (Date first included in the Academic Calendar)

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**Registration Start Date:** (Date students will begin following the new requirements)

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**Are you providing any additional supporting documents? ☐ Yes ☐ No**

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| **Program Name**:  |
| **Program and Degree Type** [e.g. Bachelor of Arts (Honours)]:  |

**Program Description (taken from Calendar):** (Please highlight changes, if any)

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**Calendar Copy, including Admission Requirements and Program Map:** [Please copy and paste the sections of the Calendar you are changing and/or add new Calendar content as it will appear in the Calendar. Highlight changes to existing content and new content. If you are changing internal program maps (e.g. charts used in Academic Advising) you may include them as an attachment, if you wish.]

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**Program structure:** [Describe any experiential or other applied learning opportunities that are part of the program component.]

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**Program learning outcomes:** [If you do not have a recent version of your program’s learning outcomes and alignment with the Degree Level Expectations, or would like to make a modification to them, please contact ciqe@uoit.ca.]

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**Brief background on the existing program:**

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**Rationale for the modification:** (How will this change enhance the program and/or opportunities for students and graduates? How did you determine this change was needed (e.g. program review, student feedback, changes to the discipline)

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**Fit with the mission, mandate, strategic plans of the University, and the broader array of program offerings** (evidence of fit, particularly areas of teaching and research strengths and complementary areas of study)**:**

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**Resource Requirements**

**Faculty members:**

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**Additional academic and non-academic human resources:**

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**Physical resource requirements:**

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**Statement of funding requirements** (for Graduate programs, note any student support funding requirements)**:**

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**Statement of resource/funding availability:**

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**Transition Plan:** [Semester (e.g. Fall 2020) for the implementation of the proposed changes; include a plan for all current students in the program, by year level. If this change impacts students that are not new and/or 1st year students as of the start date, then a transition plan is required]

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**Supporting information for online options** (When converting a large portion of the program to online/hybrid)

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**Adequacy of technological platform:** Describe the adequacy of the technological platform to be used for online delivery.

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**Maintenance of and/or changes to the quality of education:** Describe how the quality of education will be maintained and/or changed when moving to online delivery.

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**Maintenance of and/or changes to program objectives:** Describe how the current program objectives will be maintained and/or changed when moving to online delivery.

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**Maintenance of and/or changes to program-level learning outcomes:** Describe how the current program-level learning outcomes will be maintained and/or changed when moving to online delivery.

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**Sufficiency of support services and training for teaching staff:** Describe the support services and training for teaching staff that will be made available when moving to online delivery.

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**Sufficiency and type of support for students in the new learning environment:** Describe the sufficiency and type of supports that will be available to students when moving to online delivery.

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**Other:** (Additional supporting information, if applicable)

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**Have you consulted with all impacted areas? ☐ Yes ☐ NA**

**Process of consultation:** (Must include ways in which student feedback was collected; also include process of consultation with other units if the change(s) involve(s) students, staff, and/or faculty from other programs or courses)

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**Are there any considerations for the principles of Equity, Diversity, Inclusion, or Decolonization included with this program change? [ ]  Yes [ ]  No Please explain:**

* Does the program contain concepts, materials or resources from scholars/professionals who are part of one or more historically marginalized groups?
* Are multiple perspectives represented in the program, such as those offered by those who are Indigenous, Black, Persons of Colour and/or 2SLGBTQIA+?
* How has accessibility been considered? More specifically, have the needs of students with disabilities been integrated into the program design (e.g., the ways that students are asked to demonstrate their learning)?
* Will this program provide space to allow for the discussion of other viewpoints outside the “dominant, Western narrative”?
* Have the principles of [Universal Design](https://tlc.ontariotechu.ca/teaching/course-design/universal-design.php) been considered?

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**Does this Program/Change contain any Indigenous content? ☐ Yes ☐ No ☐ Unsure**

For more information on how Indigenous content is defined at Ontario Tech University and how to consult with the Indigenous Education Advisory Circle (IEAC), please refer to the [Protocol for Consultation with the Indigenous Education Advisory Circle.](https://wisc.uoit.ca/workspaces/AssociateProvost/ciqe/QEprocesses/Documents/Protocol%20for%20Consultation%20with%20the%20Indigenous%20Education%20Advisory%20Circle.pdf)

**Has the IEAC been contacted ☐ Yes ☐ No**

**If yes, when?**

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**What was the advice you received from the IEAC, and how has it been included in your proposal?**

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**Did the IEAC ask you to return the proposal to them for review? ☐ Yes ☐ No**

**If yes, have they completed their review? ☐ Yes ☐ No ☐ N/A**

Pre-Faculty Council Approval Dates (e.g. Curriculum Committee, Program Committee):