**Major Program Modification – Remove Program or Program Component**

*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**: ☐ |

**Brief summary of the reason for removal:**

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**Effective Calendar:**

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**Semester of removal/closure:** List the first effective semester for closing of program or program component.

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

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| **Program or program component name**: |
| **Program and Degree Type** [e.g. Bachelor of Arts (Honours)]: |

**Program or program component 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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**Brief background on the existing program:**

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**Rationale for removal of program or program component**

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**IMPLICATIONS AND IMPACTS**

**Faculty members:** List the implications for faculty members

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**Non-academic human resources:** List any implications related to non-academic human resources (e.g., support staff).

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**Courses:** (if courses are being removed from the Calendar please submit Course Change proposals in addition to this form)

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**Students:** Current and prospective

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**Enrolments:** (anticipated impacts on other programs, if applicable)

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**External Agencies:**

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**Detailed Timeline:** [Detailed timeline (state term e.g. Fall 2017) of when students will stop being admitted into the program, when the program will officially be closed, and when the program will be removed from the Calendar]

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**Administrative steps:** (Include a detailed outline of the administrative steps and requirements surrounding the removal of the program or component.)

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**Communication plan:**Include a detailed communication plan for all affected stakeholders (e.g., current students, staff, faculty, etc.). Please remember to consider off-map students.

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**Transition Plan:** Include a detailed transition plan for all current students, by year level. Please remember to consider off-map students.

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

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**CONSULTATION**Consultation is central to governance at Ontario Tech. Faculties are required to consult with all areas impacted by this change, and the home faculty dean is responsible for all consultation decisions in this section of the form. Note that any false statements related to consultation may require re-submission of proposals. **FACULTY CONSULTATION  
  
WILL THIS CHANGE IMPACT ANY OTHER FACULTIES? SOME EXAMPLES MAY INCLUDE, BUT ARE NOT LIMITED TO, THE SCENARIOS LISTED BELOW.\***

**Yes  No  
  
Examples:**

* *A course from another faculty is being added or removed from the program map.*
* *Changes to joint and/or service programs (e.g., 'and Management' programs, targeted minors).*
* *Changes to year of offering for courses from another faculty (e.g., moving a course from Year 1 to Year 2).*

Additional examples can be found in the [Resources section](https://sites.ontariotechu.ca/ciqe/resources/index.php) of the CIQE website.

**IF YOU ANSWERED YES TO THE QUESTION ABOVE, PLEASE EXPLAIN AND OUTLINE THE CONSULTATION PROCESS IN DETAIL. ATTACH RELEVANT DOCUMENTS (EMAILS, FACULTY COUNCIL MINUTES, ETC.) OR INCLUDE LINKS TO CORRESPONDING DOCUMENTS.\***

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**STUDENT CONSULTATION  
  
HOW HAVE CURRENT OR PROSPECTIVE STUDENTS BEEN CONSULTED ABOUT THIS CHANGE? (E.G., INFORMAL CONVERSATIONS, ATTENDANCE AT MEETINGS, SURVEY, INDIRECTLY THROUGH ACADEMIC ADVISING). PLEASE PROVIDE DETAILS BELOW. \***

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**WHAT CONSIDERATIONS HAVE BEEN MADE FOR EQUITY, DIVERSITY, INCLUSION AND DECOLONIZATION?\***

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For more information and guidance on incorporating equity, diversity and inclusion principles in curricula, please visit the [Diversity, Inclusion and Belonging resource section](https://sites.ontariotechu.ca/ciqe/resources/diversity-inclusion-and-belonging.php) of the CIQE website.

**INDIGENOUS CONTENT AND CONSULTATION**

**DOES THIS COURSE 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? Please attach or provide links to documents that outline the consultation process and advice given.**

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**DID THE IEAC ASK YOU TO RETURN THE PROPOSAL TO THEM FOR REVIEW?  Yes  No  N/A**

**IF YES, HAVE THEY COMPLETED THEIR REVIEW?  Yes  No  N/A**

**OTHER CONSULTATION  
  
HAVE YOU CONSULTED WITH STUDENTS, THE SCHOOL OF GRADUATE AND POSTDOCTORAL STUDIES, OFFICE OF THE REGISTRAR, STUDENT LIFE, THE LIBRARY AND/OR ANY OTHER AREAS ON CAMPUS THAT MAY BE IMPACTED?\*  
   
 Yes  No**

**If yes, please explain and outline the consultation process in detail.\***

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**DOES THIS CHANGE INVOLVE CO-OP?\*  
  
 Yes  No   
  
If yes, please acknowledge that you have consulted with Lindsay Coolidge, Director, External Relations and Partnerships by checking the box below.** Yes, we have consulted  
  
  
**Pre-Faculty Council Approval Dates (e.g. Curriculum Committee, Program Committee):**