**Memorial University of Newfoundland**

**Undergraduate Calendar Change Proposal Form**

**Cover Page**

**LIST OF CHANGES**

Indicate the Calendar change(s) being proposed by checking and completing as appropriate:

* New course(s):
* Amended or deleted course(s):
* New program(s):
* Amended or deleted program(s):
* New, amended or deleted Glossary of Terms Used in the Calendar entries
* New, amended or deleted Admission/Readmission to the University (Undergraduate) regulations
* New, amended or deleted General Academic Regulations (Undergraduate)
* New, amended or deleted Faculty, School or Departmental regulations
* Other:

**ADMINISTRATIVE AUTHORIZATION**

By signing below, you are confirming that the attached Calendar changes have obtained all necessary Faculty/School approvals, and that the costs, if any, associated with these changes can be met from within the existing budget allocation or authorized new funding for the appropriate academic unit.

Signature of Dean/Vice-President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of approval by Faculty/Academic Council: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_