



# Request for Approval of a Graduate Course

SCHOOL OF GRADUATE STUDIES

Adobe Reader, minimum version 8, is required to complete this form. Download the latest version: <http://get.adobe.com/reader>. (1) Save the form by clicking on the diskette icon on the upper left side of the screen; (2) Ensure that you are saving the file in PDF format; (3) Specify where you would like to save the file, e.g. Desktop; (4) Review the [How to create and insert a digital signature](#) webpage for step by step instructions; (5) Fill in the required data and save the file; (6) Send the completed form by email to: [sgs@mun.ca](mailto:sgs@mun.ca).

To: Dean, School of Graduate Studies  
From: Faculty/School/Department/Program  
Subject: Regular Course Special/Selected Topics Course

Course No.:

Course Title:

I. To be completed for all requests:

A. Course Type: Lecture course      Lecture course with laboratory  
Laboratory course      Undergraduate course<sup>1</sup>  
Directed readings      Other (please specify)

B. Can this course be offered by existing faculty?      Yes      No

C. Will this course require new funding (including payment of instructor, labs, equipment, etc.)?      Yes      No  
If yes, please specify:

D. Will additional library resources be required (if yes, please contact [munul@mun.ca](mailto:munul@mun.ca) for a resource consultation)?      Yes      No

E. Credit hours for this course:

F. Course description (please attach course outline and reading list):

G. Method of evaluation:	Percentage	
	Written	Oral
Class tests		
Assignments		
Other (specify):		
Final examination:		
<b>Total</b>		

<sup>1</sup> Must specify the additional work at the graduate level

**II. To be completed for special/selected topics course requests only**

**For special/selected topics courses, there is no evidence of:**

**Instructor's initials**

- |  |       |
|--|-------|
| 1. duplication of thesis work              | _____ |
| 2. double credit                           | _____ |
| 3. work that is a faculty research product | _____ |
| 4. overlap with existing courses           | _____ |

Recommended for offering in the                      Fall                      Winter                      Spring                      20 \_\_\_\_

Length of session if less than a semester:

**III. This course proposal has been prepared in accordance with General Regulations governing the School of Graduate Studies**

\_\_\_\_\_  
Course instructor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approval of the head of the academic unit

\_\_\_\_\_  
Date

**IV. This course proposal was approved by the Faculty/School/Council**

\_\_\_\_\_  
Secretary, Faculty/School/Council

\_\_\_\_\_  
Date