

MCC-05-30 Course Revision Form

(07/2004)

Will this course revision a If "yes", has a Program Re	ffect a current program? evision Form been submitted concurren	tly? Yes No	
2. Teaching Department:	BIOLOGY	4. Campus (Downtown, Macdonald, Off Campus, Distance Ed, Other – specify)	5. Effective Term of Implementation (Ex. Sept. 2004 = 200409) Term: 200609
3. Administering Faculty/Unit:	SCIENCE	DOWNTOWN	Retirement
	GREGOR FUSSMAN	8. Course Number(s) Indicate course number & the nu (tick all that apply)	
9		Subject/course number: BIOL Course(s) Span:	_ 479D1/479D2
9			
HONOURS RESEARC	CH PROJECT 1		
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_ In accordance with the research based court	he directive from Faculty re the DMI se.	URL, the title has been changed to	more clearly define it as a
NO CHANGE			
16. Old Course Description (may be found in the Cale	endar or Banner)		

17. Supplementary information to appear in the Calendar in addition to the course description.				

INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE

To be completed by the Faculty Slot Course: Yes

No

To be completed by ARR CIP Code

For Continuing Education Use

CE Admin. Unit:

CE Non-Grant Courses:

26. Approvals:

Routing Sequence

Departmental Meeting

Departmental Chair

Other Faculty Curric/Academic Committee

Faculty

SCTP

Name

Signature

Date

Departmental Contact Person (name/phone/email)