### Program/Major or Minor/Concentration Revision Form

**1.0 Degree Title**
Specify the two degrees for concurrent degree programs

**Bachelor of Science**

**1.1 Major (Legacy= Subject) (30-char. max.)**
Major in Atmospheric Science

**1.2 Concentration (Legacy = Concentration/Option)**
If applicable (30 char. max.)
Atmospheric Chemistry Option

**1.3 Minor (with Concentration, if applicable)**
(30 char. max.)

**1.4 Category**
- Faculty Program (FP)
- Honours (HON)
- Joint Major
- Component (HC)
- Internship/Co-op
- Thesis (T)
- Non-Thesis (N)
- Other
- Please specify

**X Major (OPTION)**

**1.5 Complete Program Title**
BSc.; Major in Atmospheric Science - Atmospheric Chemistry Option

**2.0 Administering Faculty/Unit**
Science

**Offering Faculty/Department**
Science

**3.0 Effective Term of revision or retirement**
Please give reasons in 5.0 “Rationale” in the case of retirement
(Ex. Sept. 2004 = 200409) Retirement

**Term:** 201309 Retirement

**4.0 Existing Credit Weight**
61

**Proposed Credit Weight**

**5.0 Rationale for revised program**

*We are seeking to retire the Atmospheric Chemistry option. The increased flexibility of the majors program allows this specialty area to be pursued without the need for an additional program.*

### Revised Program Description

6.0 Revised Program Description (Maximum 150 words)

---

[Box for additional notes or comments]
7.0 List of existing program and proposed program

Existing program (list courses as follows: Subj Code/Crse Num, Title, Credit weight, under the headings of: Required Courses, Complementary Courses, Elective Courses)

Proposed program (list courses as follows: Subj Code/Crse Num, Title, Credit weight, under the headings of: Required Courses, Complementary Courses, Elective Courses)

Attach extra page(s) as needed
### 8.0 Consultation with Related Units

- [ ] Yes  
- [ ] No  

Financial Consult  
- [ ] Yes  
- [ ] No  

Attach list of consultations

### 9. Approvals

<table>
<thead>
<tr>
<th>Routing Sequence</th>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curric/Acad Committee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty 1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty 2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faculty 3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SCTP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>GS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APPC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senate</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Submitted by

- Name  
- Phone  
- Email  
- Submission Date

To be completed by ARR:

- CIP Code