1. Will this course revision affect a current program?  
   If "yes", has a Program Revision Form been submitted concurrently?  
   Yes  No

2. Teaching Department:  
   CHEMISTRY

3. Administering Faculty/Unit:  
   SCIENCE

4. Campus (Downtown, Montreal,  
   Off Campus, Distance  
   Ed., Other – specify)  
   Term: 2007/08

5. Effective Term of Implementation  
   (Ex. Sept. 2004 – 2004/05)  
   Retirement

6. Responsible Instructor:  
   Subject/course number:  
   CHEM 302

7. Credit Weight  
   (or CEUs for non-credit CE courses):  
   Course(s) Span:  
   1. Term
   2. Intermittent terms (D1, D2)
   3. Consecutive terms (J1, J2)

8. Old Credit Weight or CEUs (if applicable):  

9. Number Change From:  

10. Consolidation of Courses:  

11. Summer of Multi-Term Course:  

12. Course Title (unit 30 character max, required for all courses)  
   Intro Org Chem 3.

13. New Course Title to appear in the Calendar (Optional)  
   Note: This can ONLY be an expansion of word(s) abbreviates in the 30 character course title in Box 12.  
   Introductory Organic Chemistry 3.

14. Rationale for revised course:  
   All program changes no longer guarantee that students will have any exposure to biological concepts needed for this course. The prerequisite changes listed below remedy this.

15. New Course Description:  
   (as it will appear in the Calendar (maximum 40 words)):  
   (If Faculty of Medicine must append complete course outline)

16. Old Course Description:  
   (may be found in the Calendar or Banner)

FEB 1 2 2007
17. Supplementary information to appear in the Calendar in addition to the course description. Such as: equivalent course(s), contact hours, enrollment limitations, language of instruction etc. Please enter the information as it should appear in the calendar notes.

18. Schedule Type(s): 
(Enter all that apply – see course guidelines for a complete list.)

<table>
<thead>
<tr>
<th>Hours per Week</th>
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Total Hours per Week:

Total Number of Weeks:

19. Projected Enrollment:

20. Revised Prerequisite(s) (Courses or Tests) (in italics)
Specify course number(s) or number(s) of test(s):

BIO1 112, CHEM222, or permission of the instructor.

If the student does not have a prerequisite should web registration be blocked?

Yes  No

If "Yes" complete A and B:

A. Indicate minimum grade or test score(s) the student must attain in prerequisite course(s) or test(s):

B. Can the prerequisite course(s) or test(s) be taken in the same term as this course?

Yes  No

Old prerequisite course number(s) or test score title(s) (if applicable)

CHEM 222

21. Revised Corequisite(s) (Course Number(s) in italics):
Specify course number(s)

If the student does not register for the corequisite in the same term should web registration be blocked?

Yes  No

Old corequisite course number(s) (if applicable):

22. Revised Restriction(s):

Old Restriction(s):

23. Additional Course Charges (must be approved by the Fee Policy Committee)
Description of Fee:

Amount

24. Requires Teaching, Physical, or Financial Resources
   Not Currently Available (attach explanation)

Yes  No

25. Consultation Reports Attached

Yes  No
**INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE**

To be completed by the Faculty:
- Slot Course: Yes [ ] No [ ]
- Thesis Component: Yes [ ] No [ ]

For Continuing Education Use:
- CE Admin Unit: __________
- CE Non-Grant Courses: __________
- Pilot Role: Coordinator: Yes [ ] No [ ] N/A [ ]

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<thead>
<tr>
<th>26. Approves:</th>
<th>Departmental Sequence</th>
<th>Departmental Chair</th>
<th>Other Faculty</th>
<th>Curriculum/Academic Committee</th>
<th>Faculty</th>
<th>SCTP</th>
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</thead>
<tbody>
<tr>
<td>Name</td>
<td>Bruce Lonnon</td>
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Departmental Contact Person (Name/Phone): David Ronia / x-5099 / David.Ronia@McGill.CA