# Course Revision Form

## 1. Will this course revision affect a current program?
- Yes [ ]
- No [x]

If “yes”, has a Program Revision Form been submitted concurrently?
- Yes [ ]
- No [x]

## 2. Teaching Department:
- Physics

## 3. Administering Faculty/Unit:
- Science

## 4. Campus
- (Downtown, Macdonald, Off Campus, Distance Ed, Other – specify)
- Downtown

## 5. Effective Term of Implementation
- (Ex. Sept. 2004 = 200409)
- Term: September 2008
- No Retirement

## 6. Responsible Instructor:
- Prof. G. Moore

## 7. Credit Weight
(or CEU's for non-credit CE courses):
- 3

Old Credit Weight or CEU's (if applicable)
- 3

## 8. Course Number(s)
Indicate course number & the number of terms spanned:
(tick all that apply)
- Subject/course number: PHYS 225
- Course(s) Span:
  - 1 term
  - 2 consecutive terms (D1, D2)
  - 2 non-consecutive terms (N1, N2)
  - 3 consecutive terms (J1, J2, J3)

## 9. Number Change From:

## 10. Consolidation of Courses:

## 11. Split of Multi-Term Course:

## 12. Course Title (Limit 30 char.) - required for all courses.
- No changes

Old Course Title (if applicable)
- Musical Acoustics

## 13. Course Title to Appear in the Calendar (Optional)
(Limit 59 characters):
- Note: This can ONLY be an expansion of word(s) abbreviated in the 30 character course title in Box 12.
- Musical Acoustics

## 14. Rationale for revised course
- Change of prerequisite due to modification of freshman science program.

## 15. New Course Description
(as it will appear in the Calendar [maximum 50 words]):
(N.B. Faculty of Medicine must append complete course outline)

## 16. Old Course Description
(may be found in the Calendar or Banner)
17. Supplementary information to appear in the Calendar in addition to the course description. Such as: equivalent course(s), contact hours, enrolment limitations, language of instruction etc. Please enter the information as it should appear in the calendar notes.

(Designed for students in music who have interests in sound recording and reproduction and also suitable for students in science with an interest in music)

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

<table>
<thead>
<tr>
<th>Lectures</th>
<th>Hours per Week</th>
<th>Total Hours per Week</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

Total Number of Weeks: 13

19. Projected Enrolment:
45

20. Revised Prerequisite(s) (Courses or Tests) (in full)
Specify course number(s) or name(s) of test(s):
CEGEP Physics or PHYS 101 or PHYS 131 or both MATH 112 and PHYS 224.

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)
CEGEP Physics or both MATH 112 and PHYS 224

21. Revised Corequisite(s) Course Number(s) (in full):
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(s) course numbers (if applicable):

22. Revised Restriction(s):

Old Restriction(s):

23. Additional Course Charges (must be approved by the Fee Policy Committee)
Description of Fee (e.g. screening fee) Amount

24. Requires Teaching, Physical, or Financial Resources
Not Currently Available (attach explanation)
☐ Yes ☑ No

25. Consultation Reports Attached
☐ Yes ☑ N/A
## INFORMATION FOR ADMISSIONS, RECRUITMENT & REGISTRAR'S OFFICE

<table>
<thead>
<tr>
<th>To be completed by the Faculty</th>
<th>To be completed by ARR</th>
<th>For Continuing Education Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slot Course:</td>
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<tr>
<td>Yes</td>
<td>No</td>
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<td>CIP Code</td>
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<td>CE Admin. Unit:</td>
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<tr>
<td>CE Non-Grant Courses:</td>
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<tr>
<td>Thesis Component:</td>
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<td>Flat Rate:</td>
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<td>Yes</td>
<td>No</td>
<td>CdnFlat Rate:</td>
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<td>Flat Rate:</td>
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<td>Yes</td>
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### 26. Approvals:

<table>
<thead>
<tr>
<th>Routing Sequence</th>
<th>Departmental Meeting</th>
<th>Departmental Chair</th>
<th>Other Faculty</th>
<th>Curric/Academic Committee</th>
<th>Faculty</th>
<th>SCTP</th>
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</thead>
<tbody>
<tr>
<td>Name</td>
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<td>Signature</td>
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<td>Date</td>
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<tr>
<td>Departmental Contact Person (name/phone/email)</td>
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