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

2. Teaching Department: Psychology

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: 200509

6. Credit Weight
   (or CEU’s for non-credit CE courses):
   3 credit

   Old Credit Weight or CEU’s (if applicable)

7. Course Number(s)
   Indicate course number & the number of terms spanned:
   (tick all that apply)
   Subject/course number: PSYC 213
   Course(s) Span:
   1 term
   2 consecutive terms (D1, D2)
   2 non-consecutive terms (N1, N2)
   3 terms (J1, J2, J3)

8. Number Change From:

9. Consolidation of Courses:

10. Split of Multi-Term Course:

11. Course Title (Limit 30 char.) - required for all courses.
    Cognition

   Old Course Title (if applicable)

12. 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 11.

13. Schedule Type(s):
    (Enter all that apply – see form, STVSCHD in Banner for a complete list.)
    Hours per Week
    Lecture
    Hours per Week
    Hours per Week
    Total Hours per Week: 3
    Total Number of Weeks: 13

14. Projected Enrolment:
    550
15. Revised Prerequisite(s) (Courses or Tests) (in full)
   Specify course number(s) or name(s) of test(s):
   - Psychology 100 or one other course in Psychology

   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):

16. 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):

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

18. Requires Teaching, Physical, or Financial Resources
   Not Currently Available (attach explanation)
   - Yes ☒ No

19. Consultation Reports Attached
   - Yes ☒ N/A

20. Other Information (specify):

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

   Psychology 100 or one other course in Psychology. 2 lectures.

22. Supplementary information to appear in the Calendar in addition to the course description.
   Such as: registration restriction(s), prerequisite(s), corequisite(s), equivalent course(s), contact hours,
   enrolment limitations, language of instruction etc.
   Please enter the information as it should appear in the calendar notes.
   - Psychology 100 or one other course in Psychology. 2 lectures.
23. Rationale

The prerequisite did not appear in the calendar.

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: □ Yes □ No</td>
<td>CIP Code</td>
<td>CE Admin. Unit:</td>
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<td></td>
<td></td>
<td>CE Non-Grant Courses:</td>
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<tr>
<td>Thesis Component: □ Yes □ No</td>
<td></td>
<td>Flat Rate: Cdn Flat Rate: □ Yes □ N/A</td>
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24. 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>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Thomas Shultz</td>
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<td>Signature</td>
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<td>October 20, 2004</td>
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<tr>
<td>Departmental Contact Person</td>
<td>Mary Gauthier, Psychology, 6121, <a href="mailto:mary.gauthier@mcgill.ca">mary.gauthier@mcgill.ca</a></td>
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Course Revision Form C2-3