

1. Will this course revision affect a current program? If "yes", has a Program Revision Form been submitted concurrently?		Yes No Yes No
2. Teaching Department: <div style="border: 1px solid black; padding: 2px; width: 150px; margin-left: 20px;"> Psyc </div>	4. Campus (Downtown, Macdonald, Off Campus, Distance Ed, Other – specify)	5. Effective Term of Implementation (Ex. Sept. 2004 = 200409) Term: <div style="text-align: center;">Retirement</div>
3. Administering Faculty/Unit:		
6. Responsible Instructor:		8. Course Number(s) Indicate course number & the number of terms spanned: (tick all that apply) Subject/course number: Course(s) Span: 1 term 2 consecutive terms (D1, D2) 2 non-consecutive terms (N1, N2) 3 consecutive terms (J1, J2, J3)
7. Credit Weight (or CEU's for non-credit CE courses): Old Credit Weight or CEU's (if applicable)		
9. Number Change From:	10. Consolidation of Courses:	11. Split of Multi-Term Course:
12. Course Title (Limit 30 char.) - required for all courses. Old Course Title (if applicable)	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.	
14. Rationale for revised course		
15. New Course Description (as it will appear in the Calendar [maximum 50 words]): (N.B. Faculty of Medicine must append complete course outline)		
<div style="border: 1px solid black; padding: 5px;"> A survey of major issues in the developing field of health psychology: historical perspective; health effects of stress; pain mechanisms and management; prevention and management of chronic diseases, hypertension, coronary heart disease, cancer, and immunological disorders. Behaviour change strategies for smoking, overeating, physical inactivity, and sexual risk behaviour. </div>		

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.

19. Projected Enrolment:

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
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25. Consul

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)						