



OFFICE OF THE ASSOCIATE VICE-PRESIDENT, ACADEMIC

8888 University Drive,
Burnaby, BC
Canada V5A 1S6TEL: 778.782.4636
FAX: 778.782.5876avpcio@sfu.ca
www.sfu.ca/vpacademic**MEMORANDUM**

ATTENTION	Senate	DATE	December 6, 2013
FROM	Gordon Myers, Chair Senate Committee on Undergraduate Studies	PAGES	1/1
RE:	Faculty of Health Sciences (SCUS 13-54)		

For information:

Acting under delegated authority at its meeting of December 5, SCUS approved the following curriculum revisions effective Fall 2014.

- (i) Temporarily Withdrawn Courses: HSCI 329, 443
- (ii) Course deletions of HSCI 303, 421



SIMON FRASER UNIVERSITY
ENGAGING THE WORLD

FACULTY OF HEALTH SCIENCES

PHONE (778) 782-4821
FAX (778) 782-5927

MEMORANDUM

TO: Gord Myers and the Senate Committee on Undergraduate Studies

FROM: Mark Lechner, Director, Undergraduate Programs, Faculty of Health Sciences

RE: SCUS Agenda Items

DATE: October 22, 2013

On September 19, 2013 the Faculty of Health Sciences Undergraduate Studies Committee approved changes to calendar descriptions for the following:

- Course Temporary Withdrawals
 - HSCI329-3 Exploitation and Vulnerable Populations
 - HSCI443-4 Molecular Toxicology Laboratory

- Course Deletions (forms are attached)
 - HSCI303-3 Health and Behaviour
 - HSCI421-3 Health Survey Methods

Please place these items on the agenda for the next SCUS meeting.

Regards,

Mark S. Lechner

FACULTY OF HEALTH SCIENCES
BLUSSON HALL, ROOM 11300,
SIMON FRASER UNIVERSITY,
8888 UNIVERSITY DRIVE,
BURNABY BC,
CANADA, V5A 1S6



EXISTING COURSE, CHANGES RECOMMENDED

Please check appropriate revision(s):

Course number Credit Title Description Prerequisite Course deletion Learning Outcomes

Indicate number of hours for: Lecture Seminar Tutorial Lab

FROM HSCI303 TO Course Subject/Number Credits

TITLE

(1) Long title for calendar and schedule, no more than 100 characters including spaces and punctuation.

FROM: TO:

Health and Behaviour

(2) Short title for enrollment and transcript, no more than 30 characters including spaces and punctuation.

FROM: TO:

DESCRIPTION FROM: DESCRIPTION TO:

PREREQUISITE Does this course replicate the content of a previously approved course to such an extent that students should not receive credit for both courses? If so, this should be noted in the prerequisite.

FROM: TO:

LEARNING OUTCOMES

RATIONALE

Course has not been taught for six years. Topics covered in other courses.

Effective term and year Summer 2014

Mark Lechner



EXISTING COURSE, CHANGES RECOMMENDED

Please check appropriate revision(s):

Course number Credit Title Description Prerequisite Course deletion Learning Outcomes

Indicate number of hours for: Lecture _____ Seminar _____ Tutorial _____ Lab _____

FROM **TO**
Course Subject/Number HSCI421 Course Subject/Number _____

Credits _____ Credits _____

TITLE

(1) Long title for calendar and schedule, no more than 100 characters including spaces and punctuation.

FROM: **TO:**

Health Survey Methods

(2) Short title for enrollment and transcript, no more than 30 characters including spaces and punctuation.

FROM: **TO:**

DESCRIPTION **DESCRIPTION**
FROM: **TO:**

PREREQUISITE **PREREQUISITE**
Does this course replicate the content of a previously approved course to such an extent that students should not receive credit for both courses?
If so, this should be **noted in the prerequisite.**

FROM: **TO:**

LEARNING OUTCOMES

RATIONALE

Course has not been offered in six years. Topics are covered by other courses.

Effective term and year Summer 2014

Mark Lechner