### SFU GRADUATE AND POSTDOCTORAL STUDIES

S.19-22

Simon Fraser University Maggie Benston Centre 1100 8888 University Drive Burnaby, BC V5A 186 TEL 778.782.3042 FAX 778.782.3080 gradstudies@sfu.ca www.sfu.ca/grad

| MEMORAND    | UM  |      | ``                |
|-------------|---|------|-------------------|
| ATTENTION   | Senate  | DATE | December 13, 2018 |
| FROM<br>RE: | Jeff Derksen,<br>Chair of Senate Graduate Studies<br>Committee (SGSC) |      | Art               |
|             | Course Changes  |      |                   |

#### For information:

Acting under delegated authority and at its meeting of December 4, 2018 SGSC approved the following course changes, effective **Fall 2019**:

#### Faculty of Health Sciences

- 1) Course change (description): HSCI 805
- Course changes (prerequisite): HSCI 803, HSCI 807, HSCI 822, HSCI 823, HSCI 825, HSCI 826, HSCI 829, HSCI 830, HSCI 839, HSCI 841, HSCI 842, HSCI 845, HSCI 849, HSCI 855, HSCI 870, HSCI 886, HSCI 889, HSCI 890, HSCI 891, HSCI 902, HSCI 903

#### **Faculty of Science**

Departments of Statistics and Actuarial Science

3) Course change (title, description, prerequisite, equivalency, course number): STAT 650



FACULTY OF HEALTH SCIENCES

| Education Pro                 | bgrams Blusson Hall 10704<br>8888 University Drive<br>Burnaby, BC V5Λ 1S6           | TEL 778.782.3071<br>FAX 778.782.5927 |      | tvb@sfu.ca<br>www.fhs.sfu.ca |         |
|-------------------------------|---|--------------------------------------|------|------------------------------|---------|
| MEMORAND<br>ATTENTION<br>FROM | Senate Graduate Studies Committee<br>Timothy Beischlag, Director, Graduate Programs | 5                                    | DATE | November 13, 2018            | <u></u> |
| RE:                           | HSCI Graduate Course Changes  |                                      | ,    |                              |         |

The following program and course changes have been approved by the Faculty of Health Sciences and are forwarded to the Senate Graduate Studies Committee for approval. These changes should be effective Fall 2019. Please include them on the next SGSC agenda.

- -1. Master of Public Health program change
- -2. New course proposal HSCI 895 Special Topics in Experiential Global Health Learning
- 3. Prerequisite (and description where the description had the prerequisite listed) changes for the following courses to standardize the entries as suggested by GPS:

| a. | <b>HSCI 803</b> | 1.   | HSCI 842        |
|----|-----------------|------|-----------------|
| b. | HSCI 805        | m.   | HSCI 845        |
| c. | HSCI 807        | n.   | HSCI 849        |
| d. | HSCI 822        | 0.   | HSCI 855        |
| e. | HSCI 823        | p.   | <b>HSCI 870</b> |
| f. | HSCI 825        | q.   | HSCI 886        |
| g. | HSCI 826        | r.   | HSCI 889        |
| h. | HSCI 829        | S.   | HSCI 890        |
| i. | HSCI 830        | • t. | HSCI 891        |
| j. | HSCI 839        | u.   | HSCI 902        |
| k. | HSCI 841        | v.   | HSCI 903        |
|    |                 |      |                 |

Sincerely,

C.

Timothy Beischlag Director, Graduate Programs



# **Graduate Course Change**

Attach a separate document if more space is required.

| · · · · · · · · · · · · · · · · · · ·   |   |  |  |  |  |
|---|---|--|--|--|--|
| Course Subject/Number HSCI 805  | <sup>Units</sup> 3                      |  | Effective Term and Year Fall 2019  |  |  |
| Course Title Intermediate Epidemiologic Meth  |   |  |  |  |  |
| Rationale for Change:   |   |  |  |  |  |
| Minor edit in the course description.   |   |  |  |  |  |
|   |   |  |  |  |  |
| Proposed Changes (Check all that apply)   | Proposed Changes (Check all that apply) |  |  |  |  |
| Course number 🗌 Units* 🗌 Title 🖌  | Description                             | F  | Prerequisite Other   |  |  |
| Complete only the fields to be changed  |   |  |  |  |  |
| FROM  |   | TO   |  |  |  |
| Course Subject/Number   |   | Course   | Subject/Number   |  |  |
| Units   |   | Units*   |  |  |  |
| Course Title  | 10                                      | Course   | Title (max 100 characters)   |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
| Course Short Title  |   | Course   | Short Title (max 30 characters)  |  |  |
| -   |   |  |  |  |  |
| Description   |   | Descrip  | tion   |  |  |
| Follow-up course to HSCI 802. Designing,<br>conducting, analyzing, and interpreting epide<br>research. Theoretical frameworks, concepts<br>inference, measures of disease occurrence a<br>effect, study designs, issues in measurement<br>confounding, and interaction. Critical assess<br>the epidemiologic and public health literature | of<br>and<br>it, bias,<br>ment of       | epiden<br>concej<br>occurr<br>measu<br>Critica | ning, conducting, analyzing, and interpreting<br>niologic research. Theoretical frameworks,<br>ots of inference, measures of disease<br>ence and effect, study designs, issues in<br>irement, bias, confounding, and interaction.<br>I assessment of the epidemiologic and<br>health literature. |  |  |
| Prerequisite  |   | Prerequisite                                   |  |  |  |
|   | 5                                       |  |  |  |  |
| Other   |   | Other  |  |  |  |
|   |   |  |  |  |  |
|   |   |  | e .  |  |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature            | Date NOV 1 4 2018  |
|--|----------------------|--|
| SENATE GRADUATE STU  | DIES COMMITTEE APPRO | DVAL   |
| Senate Graduate Studies Committee (SGSC)   | Signature            | Dete DEC 1 3 2018  |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If dif<br>Acad       | ferent from regular units:<br>lemic Progress Units:<br>ncial Aid Progress Units: |



# **Graduate Course Change**

Attach a separate document if more space is required.

| Course Subject/Number HSCI 803                         | Units 4         | Effective Term and Year Fall 2019    |
|--|-----------------|--------------------------------------|
| Course Title Qualitative and Survey Research           | n Methods       |                                      |
| Rationale for Change:                                  |                 |                                      |
| This course is open to all HSCI grad stud              | ents and no pre | requisites required for this course. |
| Proposed Changes (Check all that apply)                |                 |                                      |
| Course number Units* Title                             | Description 🗸   | Prerequisite Other                   |
| Complete only the fields to be changed<br>FROM         | ТО              |                                      |
| Course Subject/Number                                  |                 | e Subject/Number                     |
|  |                 |                                      |
| Units  | Units*          |                                      |
| Course Title   | Course          | e Title (max 100 characters)         |
| Course Short Title                                     | Cours           | e Short Title (max 30 characters)    |
| Description  | Descri          | ption                                |
|  |                 |                                      |
| Prerequisite   | Preireo         | uisite                               |
| Admission to the graduate program or permission of the | Instructor.     |                                      |
| Other  | Other           |                                      |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)  | Signature                     | Date  |              |
|--|-------------------------------|---|--------------|
| Timothy Beischlag  | 1.                            |   | NOV 1 4 2018 |
|  | 0                             |   |              |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL       |   |              |
| Senate Graduate Studies Committee (SGSC)   | Signature                     | Date  | DEC 1 3 2018 |
|  |                               |   |              |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | lf different f<br>Academic Pi | rom regular un<br>rogress Units: _<br>I Progress Unit |              |



# **Graduate Course Change**

#### Attach a separate document if more space is required.

| Course Subject/Number HSCI 807                              | Units 3 |         | Effective Term and Year Fall 2019  |  |  |
|---|---------|---------|--|--|--|
| Course Title Theorizing and Research Health Inequities      |         |         |  |  |  |
| Rationale for Change:                                       |         |         |  |  |  |
| Minor edit to prerequisite.                                 |         |         |  |  |  |
| Proposed Changes (Check all that apply)                     |         |         |  |  |  |
| Course number Units* Title Description 🖌 Prerequisite Other |         |         |  |  |  |
| Complete only the fields to be changed                      |         | то      |  |  |  |
| FROM  |         |         | Subject/Number   |  |  |
| Course Subject/Number                                       |         | Course  | Subject/Number   |  |  |
| Units   |         | Units*  |  |  |  |
| Course Title  |         | Course  | Title (max 100 characters)   |  |  |
| 500 - K   |         |         |  |  |  |
| Course Short Title  |         | Course  | Short Title (max 30 characters)  |  |  |
| Description   |         | Descrip | tion   |  |  |
| •   |         |         |  |  |  |
|   |         | 22      |  |  |  |
|   |         |         |  |  |  |
| ·   |         |         | ан санан |  |  |
| Prerequisite  |         | Prerequ | Jisite   |  |  |
| HSCI 802 and 803 or permission of instr                     | uctor.  | HSCI    | 802 and 803.   |  |  |
| Other   |         | Other   | 1  |  |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature   | Date NOV 1 4 2018 |
|--|---|-------------------|
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL   |                   |
| Senate Graduate Studies Committee (SGSC)   | Signature   | Dete DEC 1 3 2018 |
|  |   |                   |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | nly)<br>If different from<br>Academic Progr<br>Financial Aid Pr | ress Units:       |



# **Graduate Course Change**

Attach a separate document if more space is required.

| Course Subject/Number HSCI 822                        | Units 3       | Effective Term and Year Fall 2019       |  |
|---|---------------|---|--|
| Course Title Global Health Governance                 |               |   |  |
| Rationale for Change:                                 |               | V.                                      |  |
| This course is open to all HSCI grad stuc             | lents and no  | prerequisites required for this course. |  |
| Proposed Changes (Check all that apply)               |               |   |  |
|   | Description   | Prerequisite Other                      |  |
| Complete only the fields to be changed                |               |   |  |
| FROM  | TO            |   |  |
| Course Subject/Number                                 | Co            | ourse Subject/Number                    |  |
| Units   | Un            | nits*                                   |  |
| Course Title  | Co            | ourse Title (max 100 characters)        |  |
|   |               |   |  |
| Course Short Title                                    | Co            | ourse Short Title (max 30 characters)   |  |
| Description   | De            | escription                              |  |
|   |               |   |  |
|   |               | 2<br>                                   |  |
| Prerequisite  |               | Prerequisite                            |  |
| Admission to the graduate program or permission of th | e Instructor. |   |  |
| Other   | Ot            | her                                     |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

#### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC) | Signature                        | Date<br>NOV 1 4 2018 |
|---|----------------------------------|----------------------|
| Tim Beischlag                             | EL.                              | NUV 14 2010          |
|   |                                  |                      |
| SENATE GRADUATE STU                       | DIES COMMITTEE APPROVAL          |                      |
| Senate Graduate Studies Committee (SGSC)  | Signature                        | Date                 |
| Jeff Derksen                              | AF                               | DEC 1 3 2018         |
|   |                                  |                      |
| ADMINISTRATIVE SECTION (for DGS office or |                                  |                      |
| Course Attribute:                         |                                  | n regular units:     |
| Course Attribute Value:                   | Academic Prog<br>Financial Aid P |                      |
| Instruction Mode:                         | Financial Alu F                  | logiess offics:      |
| Attendance Type:                          |                                  |                      |

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# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 823   | Units 3           | Effective Term and Year Fall 2019    |
|--|-------------------|--------------------------------------|
| Course Title Health, Gender and Developmen                             | t                 |                                      |
| Rationale for Change:  |                   |                                      |
| This course is open to all HSCI grad stude                             | ents and no prer  | requisites required for this course. |
|  |                   |                                      |
|  |                   |                                      |
| Proposed Changes (Check all that apply)                                |                   |                                      |
| Course number Units* Title I   | Description 🖌 🗹 F | Prerequisite Other                   |
| Complete only the fields to be changed                                 |                   |                                      |
| FROM   | ТО                |                                      |
| Course Subject/Number  | Course            | Subject/Number                       |
| Units  | Units*            |                                      |
| Course Title   | Course            | Title (max 100 characters)           |
|  |                   | ·                                    |
| ÷  |                   |                                      |
|  |                   | · · · · ·                            |
| Course Short Title   |                   | Short Title (max 30 characters)      |
|  |                   |                                      |
| Description  | Descrip           | tion                                 |
|  |                   |                                      |
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|  |                   |                                      |
|  |                   |                                      |
| *  |                   |                                      |
| 2  | Prerequ           | lisito                               |
| Prerequisite<br>Admission to the graduate program or permission of the |                   | lisite                               |
| Admission to the graduate program of permission of the                 |                   |                                      |
| Other  | Other             |                                      |
|  |                   |                                      |
|  |                   | 145 C                                |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |  |
|---------------------------------------|-----------|------|--|
| Department Chair<br>N/A               | Signature | Date |  |

| Faculty Graduate Studies Committee (FGSC) | Signature             | Date   | NOV 1 4 2018 |
|---|-----------------------|--|--------------|
| Tim Beischlag                             | RP 1                  |  | 101 14 2018  |
|   |                       |  |              |
| SENATE GRADUATE STU                       | DIES COMMITTEE APPROV | /AL  |              |
| Senate Graduate Studies Committee (SGSC)  | Signature             | Date   | DEC 1 3 2018 |
| Jeff Derksen                              | NF                    |  | DEC 13 2010  |
|   | U                     |  |              |
| ADMINISTRATIVE SECTION (for DGS office of | nty)                  |  |              |
| Course Attribute:                         |                       | rent from regular un                           | its:         |
| Course Attribute Value:                   |                       | nic Progress Units: _<br>ial Aid Progress Unit | <u>.</u>     |
| Instruction Mode:<br>Attendance Type:     | Financ                | lat Alu Flogi ess unit                         |              |
| Attenuatice type:                         |                       |  |              |



# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 825   | Units 3     |  | Effective Term and Year Fall 2019 |  |
|--|-------------|--|-----------------------------------|--|
| Course Title Advocacy and Communication  |             |  |                                   |  |
| Rationale for Change:  |             |  |                                   |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |             |  |                                   |  |
|  |             |  |                                   |  |
| Proposed Changes (Check all that apply)  |             |  |                                   |  |
| Course number Units* Title   | Description | F                                      | Prerequisite Other                |  |
| Complete only the fields to be changed   | r           |  |                                   |  |
| FROM   |             | то                                     |                                   |  |
| Course Subject/Number  |             | Course                                 | Subject/Number                    |  |
| Units  |             | Units*                                 |                                   |  |
| Course Title   |             | Course Title (max 100 characters)      |                                   |  |
|  |             |  | ·                                 |  |
| Course Short Title   |             | Course Short Title (max 30 characters) |                                   |  |
| Description  |             | Descrip                                | tion                              |  |
|  |             |  |                                   |  |
|  |             |  |                                   |  |
|  |             |  |                                   |  |
| • •  |             |  |                                   |  |
| a e  |             |  |                                   |  |
| Prerequisite   |             | Prerequisite                           |                                   |  |
| Admission to the graduate program or permission of the Instructor.                           |             |  |                                   |  |
| Other  |             | Other                                  |                                   |  |
|  |             |  | ·                                 |  |
|  |             |  |                                   |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Şmith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature                          | NOV 1 4 2018                                      |
|--|------------------------------------|---|
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL            |   |
| Senate Graduate Studies Committee (SGSC)   | Signature                          | Date DEC 1 3 2018                                 |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If different from<br>Academic Prog | m regular units:<br>ress Units:<br>rogress Units: |



# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 826                         | <sup>Units</sup> 3 | Effective Term and Year Fall 2019     |
|--|--------------------|---------------------------------------|
| Course Title Program Planning and Evaluation           | n                  |                                       |
| Rationale for Change:                                  |                    |                                       |
| This course is open to all HSCI grad stude             | ents and no p      | erequisites required for this course. |
|  |                    | -                                     |
| Proposed Changes (Check all that apply)                |                    |                                       |
| Course number Units* Title I                           | Description 🖌      | Prerequisite Other                    |
| Complete only the fields to be changed                 |                    |                                       |
| FROM   | ТО                 |                                       |
| Course Subject/Number                                  | Cour               | se Subject/Number                     |
| Units  | Units              | *                                     |
| Course Title   | Cour               | se Title (max 100 characters)         |
|  |                    | · ·                                   |
| Course Short Title                                     | Cour               | se Short Title (max 30 characters)    |
| Description  | . Desc             | ription                               |
|  | 25 - 35<br>- 35    | *                                     |
|  |                    |                                       |
|  |                    |                                       |
| Prerequisite   |                    | equisite                              |
| Admission to the graduate program or permission of the | Instructor.        |                                       |
| Other  | Othe               | Γ                                     |
|  |                    |                                       |
|  |                    |                                       |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC) | Signature          | Date                  | NOV 4 1 2010   |
|---|--------------------|-----------------------|--|
| Tim Beischlag                             | 0.                 |                       | NOV 1 4 2018   |
|   | Y                  |                       |  |
| SENATE GRADUATE STU                       | DIES COMMITTEE APP | ROVAL                 |  |
| Senate Graduate Studies Committee (SGSC)  | Signature          | Date                  | DE0 4 9 0040   |
| Jeff Derksen                              |                    |                       | DEC 1 3 2018   |
|   | 910                |                       |  |
| ADMINISTRATIVE SECTION (for DGS office or |                    |                       | the second s |
| Course Attribute:                         |                    | different from regula |  |
| Course Attribute Value:                   |                    | ademic Progress Uni   |  |
| Instruction Mode:                         | FI                 | nancial Aid Progress  | Units:   |
| Attendance Type:                          |                    |                       |  |



# Graduate Course Change

Attach a separate document if more space is required.

| Attach a Separate accument in more opace is requ   |               |                                   |  |  |
|--|---------------|-----------------------------------|--|--|
| Course Subject/Number HSCI 829   | Units 3       | Effective Term and Year Fall 2019 |  |  |
| Course Title Health Policy Making in a Global Context  |               |                                   |  |  |
| Rationale for Change:  |               | 8                                 |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |               |                                   |  |  |
| Proposed Changes (Check all that apply)  |               |                                   |  |  |
| Course number Units* Title I   | Description 🖌 | Prerequisite Other                |  |  |
| Complete only the fields to be changed   |               |                                   |  |  |
| FROM   | ТО            |                                   |  |  |
| Course Subject/Number  |               | Subject/Number                    |  |  |
| Units  | Units*        |                                   |  |  |
| Course Title   | Course        | Title (max 100 characters)        |  |  |
|  |               | - 8                               |  |  |
|  |               |                                   |  |  |
| Course Short Title   | Course        | Short Title (max 30 characters)   |  |  |
| Description  | Descri        | otion                             |  |  |
|  |               |                                   |  |  |
|  |               |                                   |  |  |
|  |               |                                   |  |  |
| 5<br>*   |               |                                   |  |  |
| Prerequisite   | Prereq        | uisite                            |  |  |
| Admission to the graduate program or permission of the                                       | Instructor.   |                                   |  |  |
| Other  | Other         | •                                 |  |  |
| ×  |               |                                   |  |  |
|  |               |                                   |  |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair                      | Signature | Date |
| N/A                                   |           |      |

| Faculty Graduate Studies Committee (FGSC)  | Signature                       | Date  |
|--|---------------------------------|---|
| Tim Beischlag  | (p).                            | NOV 1 4 2018  |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL         |   |
| Senate Graduate Studies Committee (SGSC)   | Signature                       | Dete DEC 1 3 2018                                     |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If different fr<br>Academic Pro | om regular units:<br>ogress Units:<br>Progress Units: |



SIMON FRASER UNIVERSITY graduate studies & postdoctoral fellows

# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 830 Units   | 3 Effective Term and Year Fall 2019    |  |  |  |
|--|--|--|--|--|
| Course Title Health Promotion in Partnership: Catalyzing Change                              |  |  |  |  |
| Rationale for Change:  |  |  |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |  |  |  |  |
|  |  |  |  |  |
| Proposed Changes (Check all that apply)  |  |  |  |  |
| Course number Units* Title Description   | on 🗹 Prerequisite 🗌 Other              |  |  |  |
| Complete only the fields to be changed   |  |  |  |  |
| FROM   | ТО                                     |  |  |  |
| Course Subject/Number  | Course Subject/Number                  |  |  |  |
| Units  | Units*                                 |  |  |  |
| Course Title   | Course Title (max 100 characters)      |  |  |  |
|  |  |  |  |  |
| Course Short Title   | Course Short Title (max 30 characters) |  |  |  |
| Description  | Description                            |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Prerequisite   | Prerequisite                           |  |  |  |
| Admission to the graduate program or permission of the Instructor.                           |  |  |  |  |
| Other  | Other                                  |  |  |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature   | Date NOV 1 4 2018    |  |  |
|--|---|----------------------|--|--|
| SENATE GRADUATE STUDIES COMMITTEE APPROVAL   |   |                      |  |  |
| Senate Graduate Studies Committee (SGSC)   | Signature   | Date<br>DEC 1 3 2018 |  |  |
| ,  | UP  |                      |  |  |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | nly)<br>If different from<br>Academic Prog<br>Financial Aid P |                      |  |  |



SIMON FRASER UNIVERSITY graduate studies & postdoctoral fellows

# **Graduate Course Change**

Attach a separate document if more space is required.

| Course Subject/Number HSCI 839                         | Units 3     |                           | Effective Term and Year Fall 2019 |  |
|--|-------------|---------------------------|-----------------------------------|--|
| Course Title Strategies for Reducing Health Inequities |             |                           |                                   |  |
|  |             |                           |                                   |  |
| Rationale for Change:<br>Minor edit to prerequisite.   |             |                           |                                   |  |
| Millor edit to prefequisite.                           |             |                           |                                   |  |
|  |             |                           |                                   |  |
| Proposed Changes (Check all that apply)                |             |                           |                                   |  |
| Course number Units* Title                             | Description | V F                       | Prerequisite Other                |  |
| Complete only the fields to be changed                 |             |                           |                                   |  |
| FROM   |             | то                        |                                   |  |
| Course Subject/Number                                  |             | Course                    | Subject/Number                    |  |
| Units  | 187         | Units*                    |                                   |  |
| Course Title   | - 23        | Course                    | Title (max 100 characters)        |  |
| 14 - 1   |             |                           | · ·                               |  |
|  |             |                           |                                   |  |
|  |             |                           |                                   |  |
| Course Short Title                                     |             | Course                    | Short Title (max 30 characters)   |  |
|  |             |                           | 2                                 |  |
| Description  |             | Descrip                   | tion                              |  |
|  |             |                           |                                   |  |
|  |             |                           | .e.                               |  |
|  |             |                           |                                   |  |
| 8  |             |                           |                                   |  |
|  |             |                           |                                   |  |
|  |             |                           | -                                 |  |
| Prerequisite   |             | Prerequisite<br>HSCI 807. |                                   |  |
| HSCI 807, 838, or permission of instructor.            |             | HSCI                      | 807.                              |  |
| Other  |             | Other                     |                                   |  |
|  | ·*          |                           |                                   |  |
| > <sup>1</sup>   |             |                           |                                   |  |

### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)  | Signature                          | Date NOV 1 / Date                                 |
|--|------------------------------------|---|
| Tim Beischlag  | NO.                                | NOV 1 4 2018                                      |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL            |   |
| Senate Graduate Studies Committee (SGSC)   | Signature                          | Date DEC 1 3 2018                                 |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | lf different from<br>Academic Prog | n regular units:<br>ress Units:<br>rogress Units: |



# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 841                           | Units 3       |         | Effective Term and Year Fall 2019     |  |
|--|---------------|---------|---------------------------------------|--|
| Course Title Qualitative Research and Analytical Methods |               |         |                                       |  |
|  |               |         |                                       |  |
| Rationale for Change:                                    |               |         |                                       |  |
| This course is open to all HSCI grad stud                | dents and     | no prer | equisites required for this course.   |  |
|  |               |         |                                       |  |
| Proposed Changes (Check all that apply)                  |               |         |                                       |  |
| Course number Units* Title                               | Description   | F       | Prerequisite Other                    |  |
| Complete only the fields to be changed                   |               |         |                                       |  |
| FROM   |               | TO      | · · · · · · · · · · · · · · · · · · · |  |
| Course Subject/Number                                    |               | Course  | Subject/Number                        |  |
| Units  |               | Units*  |                                       |  |
| Course Title   |               | Course  | Title (max 100 characters)            |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |
| Course Short Title                                       |               | Course  | Short Title (max 30 characters)       |  |
|  |               | *       |                                       |  |
| Description  |               | Descrip | tion                                  |  |
|  |               |         |                                       |  |
|  |               | *       |                                       |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |
| Prerequisite   |               | Prerequ | lisite                                |  |
| Admission to the graduate program or permission of th    | e Instructor. |         |                                       |  |
| Other  |               | Other   |                                       |  |
|  |               |         |                                       |  |
|  |               |         |                                       |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date . |
|---------------------------------------|-----------|--------|
| Department Chair<br>N/A               | Signature | Date   |

| Faculty Graduate Studies Committee (FGSC) Sign<br>Tim Beischlag   | nature<br>P,                     | Date        | NOV 1 4 2018 |
|---|----------------------------------|-------------|--------------|
| SENATE GRADUATE STUDIE  | S COMMITTEE APPROVAL             |             | ×            |
| Senate Graduate Studies Committee (SGSC) Sign                     | nature                           | Date        | DEC 1 3 2018 |
| ADMINISTRATIVE SECTION (for DGS office only)<br>Course Attribute: | If different from                | m regular u | nits:        |
| Course Attribute Value;<br>Instruction Mode:<br>Attendance Type;  | Academic Prog<br>Financial Aid P |             |              |



# **Graduate Course Change**

Attach a separate document if more space is required.

| Course Subject/Number HSCI 842   | Units 3       | Effective Term and Year Fall 2019     |  |  |
|--|---------------|---------------------------------------|--|--|
| Course Title Indigenous Health in Canada   |               |                                       |  |  |
| Rationale for Change:  |               |                                       |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |               |                                       |  |  |
|  |               |                                       |  |  |
| Proposed Changes (Check all that apply)  |               |                                       |  |  |
| Course number Units* Title   | Description   | Prerequisite Other                    |  |  |
| Complete only the fields to be changed   |               |                                       |  |  |
| FROM   | TC            |                                       |  |  |
| Course Subject/Number  | Co            | burse Subject/Number                  |  |  |
| Units  | U             | nits*                                 |  |  |
| Course Title   | Co            | burse Title (max 100 characters)      |  |  |
| *  |               |                                       |  |  |
|  |               | а.,                                   |  |  |
| Course Short Title   | C             | ourse Short Title (max 30 characters) |  |  |
|  |               |                                       |  |  |
| Description  | De            | escription                            |  |  |
|  |               |                                       |  |  |
|  |               |                                       |  |  |
|  |               |                                       |  |  |
|  |               |                                       |  |  |
|  |               |                                       |  |  |
| Prerequisite   | Pi            | Prerequisite                          |  |  |
| Admission to the graduate program or permission of the                                       | e Instructor. |                                       |  |  |
| Other  | 01            | ther                                  |  |  |
|  |               |                                       |  |  |
| ×  |               |                                       |  |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair                      | Signature | Date |
| N/A                                   |           |      |

| Faculty Graduate Studies Committee (FGSC)  | Signature                          | Date NOV 1 4 2018                                 |
|--|------------------------------------|---|
| Tim Beischlag  | Da                                 | 101 1 4 2010                                      |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL            |   |
| Senate Graduate Studies Committee (SGSC)   | Signature                          | Date DEC 1 3 2018                                 |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If different from<br>Academic Prog | n regular units:<br>ress Units:<br>rogress Units: |



## **Graduate Course Change**

#### Attach a separate document if more space is required.

| Course Subject/Number HSCI 845   | Units 3       | Effective Term and Year Fall 2019 |  |  |  |
|--|---------------|-----------------------------------|--|--|--|
| Course Title Environmental and Occupational Health   |               |                                   |  |  |  |
| Rationale for Change:  |               |                                   |  |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |               |                                   |  |  |  |
| Proposed Changes (Check all that apply)  |               |                                   |  |  |  |
| Course number Units* Title I   | Description 🖌 | Prerequisite Other                |  |  |  |
| Complete only the fields to be changed   |               |                                   |  |  |  |
| FROM   | ТО            | 1                                 |  |  |  |
| Course Subject/Number  | Cours         | e Subject/Number                  |  |  |  |
| Units  | Units*        |                                   |  |  |  |
| Course Title   | Cours         | e Title (max 100 characters)      |  |  |  |
|  |               |                                   |  |  |  |
| Course Short Title   | Cours         | e Short Title (max 30 characters) |  |  |  |
| Description  | Descr         | ption                             |  |  |  |
|  |               |                                   |  |  |  |
|  |               |                                   |  |  |  |
|  |               |                                   |  |  |  |
| Prerequisite<br>Admission to the graduate program or permission of the                       |               | quisite                           |  |  |  |
| Other  | Other         |                                   |  |  |  |
|  | 0             |                                   |  |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program | Contact name | • | Contact email |
|-------------------------------|--------------|---|---------------|
| Faculty of Health Sciences    | Kellie Smith |   | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
|                                       |           |      |
| Department Chair                      | Signature | Date |
| N/A                                   |           | *    |

| Faculty Graduate Studies Committee (FGSC)    | Signature                          | Date NOV 1 / 2010               |
|--|------------------------------------|---------------------------------|
| Tim Beischlag                                |                                    | NOV 1 4 2018                    |
|  | 0                                  |                                 |
| SENATE GRADUATE STU                          | DIES COMMITTEE APPROVAL            |                                 |
| Senate Graduate Studies Committee (SGSC)     | Signature                          | Date                            |
| Jeff Derksen                                 |                                    | DEC 1 3 2018                    |
|  | 17                                 |                                 |
| ADMINISTRATIVE SECTION (for DGS office or    |                                    |                                 |
| Course Attribute:                            | lf different fron<br>Academic Prog | n regular units:<br>ress Units: |
| Course Attribute Value:<br>Instruction Mode: |                                    | rogress Units:                  |
| Attendance Type:                             |                                    |                                 |



# **Graduate Course Change**

#### Attach a separate document if more space is required.

| Course Subject/Number HSCI 849                | Units 3     | B Effective Term and Year Fall 2019    |
|---|-------------|--|
| Course Title Regression Modeling for Public I | Health      |  |
| Rationale for Change:                         |             |  |
| Minor change to prerequisite.                 |             |  |
|   |             |  |
| Proposed Changes (Check all that apply)       |             | •                                      |
|   | Description | on 🖌 Prerequisite 🗌 Other              |
| Complete only the fields to be changed        | T           | ,                                      |
| FROM  |             | TO                                     |
| Course Subject/Number                         |             | Course Subject/Number                  |
| Units   |             | Units*                                 |
| Course Title                                  |             | Course Title (max 100 characters)      |
|   |             |  |
| a   |             |  |
| Course Short Title                            |             | Course Short Title (max 30 characters) |
|   |             |  |
| Description                                   |             | Description                            |
| 5. I  |             |  |
| *   |             | *                                      |
|   |             |  |
|   |             |  |
|   |             |  |
| Prerequisite                                  |             | Prerequisite                           |
| HSCI 802 or permission of the instructor      |             | HSCI 802.                              |
| Other   |             | Other                                  |
|   |             | *                                      |
|   |             |  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature                          | <sup>Date</sup> NOV 1 4 2018                      |
|--|------------------------------------|---|
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL            | L   |
| Senate Graduate Studies Committee (SGSC)   | Signature                          | Date<br>DEC 1 3 2018                              |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If different from<br>Academic Prog | n regular units:<br>ress Units:<br>rogress Units: |



# Graduate Course Change

| Attach a separate | document if | more space | is required. |  |
|-------------------|-------------|------------|--------------|--|
|                   |             |            |              |  |

| Course Subject/Number HSCI 855            | Units 3       | Effective Term and Year Fall 2019    |
|---|---------------|--------------------------------------|
| Course Title Health Promotion in Practice |               |                                      |
| Rationale for Change:                     | *             |                                      |
| Minor change to prerequisite.             |               |                                      |
|   |               |                                      |
| Proposed Changes (Check all that apply)   |               |                                      |
| Course number Units* Title                | Description [ | ✓ Prerequisite Other                 |
| Complete only the fields to be changed    |               |                                      |
| FROM                                      | то            |                                      |
| Course Subject/Number                     | Cou           | urse Subject/Number                  |
| Units                                     | Uni           | its*                                 |
| Course Title                              | Cou           | urse Title (max 100 characters)      |
|   |               |                                      |
|   |               |                                      |
| Course Short Title                        | Cou           | urse Short Title (max 30 characters) |
|   |               |                                      |
| Description                               | Des           | escription                           |
|   |               |                                      |
|   |               |                                      |
|   |               |                                      |
|   |               |                                      |
|   |               |                                      |
| Prerequisite                              | Pre           | erequisite                           |
| HSCI 901 or permission of the instructor  | . Hs          | SCI 901.                             |
| Other                                     | Oth           | her                                  |
|   |               |                                      |
|   |               | 2                                    |

| CONTACT PERSON                |              |               |
|-------------------------------|--------------|---------------|
| Department / School / Program | Contact name | Contact email |
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

| Faculty Graduate Studies Committee (FGSC)   | Signature   | Date NOV 1 4 2018 |
|---|---|-------------------|
| Tim Beischlag   | · ·   | 101 14 2010       |
| SENATE GRADUATE STUD  | IES COMMITTEE APPROVAL  |                   |
| Senate Graduate Studies Committee (SGSC)  | Signature   | Date DEC 1 3 2018 |
|   | 0   |                   |
| ADMINISTRATIVE SECTION (for DGS office onl<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | y)<br>If different from<br>Academic Progr<br>Financial Aid Pr | ress Units:       |



## Graduate Course Change

Attach a separate document if more space is required.

| 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                  |                    |         | and the second |
|--|--------------------|---------|--|
| Course Subject/Number HSCI 870   | <sup>Units</sup> 3 |         | Effective Term and Year Fall 2019  |
| Course Title Global Health and International                           | Affairs            |         |  |
| Rationale for Change:  |                    |         |  |
| This course is open to all HSCI grad stuc                              | lents and          | no prer | equisites required for this course.  |
| Proposed Changes (Check all that apply)                                |                    |         |  |
| Course number Units* Title   | Description        | V F     | Prerequisite Other   |
| Complete only the fields to be changed                                 |                    |         |  |
| FROM   |                    | TO      |  |
| Course Subject/Number  | -                  | Course  | Subject/Number   |
| Units  |                    | Units*  |  |
| Course Title   |                    | Course  | Title (max 100 characters)   |
| Course Short Title   |                    | Course  | Short Title (max 30 characters)  |
| Description  |                    | Descrip | tion   |
|  |                    |         |  |
| Prerequisite<br>Admission to the graduate program, or permission of th | ne instructor.     | Prerequ | iisite   |
| Other  |                    | Other   | · · · · ·  |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair                      | Signature | Date |
| N/A                                   |           |      |

| Faculty Graduate Studies Committee (FGSC)  | Signature                          | Date NOV 1 / 2010                                 |
|--|------------------------------------|---|
| Tim Beischlag  | - P.F.                             | NOV 1 4 2018                                      |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL            | 1   |
| Senate Graduate Studies Committee (SGSC)   | Signature                          | Dec 1 3 2018                                      |
|  | 00                                 |   |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | If different from<br>Academic Prog | n regular units:<br>ress Units:<br>rogress Units: |



# **Graduate Course Change**

| Attach a separate document if more space is requi | red.               | ·<br>                                 |
|---|--------------------|---------------------------------------|
| Course Subject/Number HSCI 886                    | <sup>Units</sup> 6 | Effective Term and Year Fall 2019     |
| Course Title MSc Thesis Proposal                  |                    |                                       |
| Rationale for Change:                             |                    | а.                                    |
| This course is open to all HSCI grad stude        | ents and no pr     | erequisites required for this course. |
| Proposed Changes (Check all that apply)           |                    |                                       |
| Course number Units* Title C                      | escription         | Prerequisite Other                    |
| Complete only the fields to be changed            |                    |                                       |
| FROM  | ТО                 |                                       |
| Course Subject/Number                             | Cour               | se Subject/Number                     |
| Units   | Units              | *                                     |
| Course Title                                      | Cour               | se Title (max 100 characters)         |
| Course Short Title                                | Cour               | se Short Title (max 30 characters)    |
| Description                                       | Desc               | ription                               |
|   |                    |                                       |
|   | -02                |                                       |
| 4   |                    |                                       |
| Prerequisite                                      | Prer               | equisite                              |
| Enrolment in HSCI MSc program.                    |                    |                                       |
| Other   | Othe               | F                                     |

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair                      | Signature | Date |
| N/A                                   |           |      |

| Tim Beischlag  |  |
|--|--|
|  |  |
| SENATE GRADUATE STUDIES COMMITTEE APPROVAL   |  |
| Senate Graduate Studies Committee (SGSC) Signature Date  |  |
| Jeff Derksen DEC 1 3 2018  |  |
|  |  |
| ADMINISTRATIVE SECTION (for DGS office only) Course Attribute: If different from regular units: Academic Progress Units: Instruction Mode: Financial Aid Progress Units: |  |



## Graduate Course Change

Attach a separate document if more space is required.

| , , , , , , , , , , , , , , , , , , ,   | and the second |                     |                                   |  |  |
|---|--|---------------------|-----------------------------------|--|--|
| Course Subject/Number HSCI 889  | Units 3  |                     | Effective Term and Year Fall 2019 |  |  |
| Course Title Special Topics in Infectious Diseases  |  |                     |                                   |  |  |
| Rationale for Change:   |  |                     |                                   |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course.  |  |                     |                                   |  |  |
| Proposed Changes (Check all that apply)   |  |                     |                                   |  |  |
| 16 - C  | Description  | <b>√</b> P          | rerequisite Other                 |  |  |
| Complete only the fields to be changed  |  |                     |                                   |  |  |
| FROM  |  | ГО                  |                                   |  |  |
| Course Subject/Number   | C  | Course S            | Subject/Number                    |  |  |
| Units   | U  | Jnits*              | •                                 |  |  |
| Course Title  | C  | Course <sup>-</sup> | Title (max 100 characters)        |  |  |
| Course Short Title  | C.   | Course              | Short Title (max 30 characters)   |  |  |
| Description   | C  | Descript            | tion                              |  |  |
|   |  | 5                   |                                   |  |  |
|   |  |                     |                                   |  |  |
| a construction of the second se |  | Prerequ             | isite                             |  |  |
| Admission to the graduate program, or permission of the instructor.   |  |                     |                                   |  |  |
| Other   | C  | Other               |                                   |  |  |
|   |  |                     |                                   |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

#### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC) | Signature               | Date NOV 1 4 2018                     |
|---|-------------------------|---------------------------------------|
| Tim Beischlag                             | SI.                     | 14 2010                               |
|   | A                       |                                       |
| SENATE GRADUATE STU                       | DIES COMMITTEE APPROVAL |                                       |
| Senate Graduate Studies Committee [SGSC]  | Signature /             | Date                                  |
| Jeff Derksen                              |                         | DEC 1 3 2018                          |
|   | 170 -                   |                                       |
| ADMINISTRATIVE SECTION (for DGS office or | nty)                    | the first property where the party of |
| Course Attribute:                         |                         | om regular units:                     |
| Course Attribute Value:                   | Academic Pro            | Progress Units:<br>Progress Units:    |
| Instruction Mode:Attendance Type:         | Filanciat Alu           |                                       |
| Attendance Types                          |                         |                                       |

Page 2 of 2 Revised May 2015



## SIMON FRASER UNIVERSITY graduate studies & postdoctoral fellows

## Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 890   | Units 4      | Effective Term and Year Fall 2019 |  |  |
|--|--------------|-----------------------------------|--|--|
| Course Title Special Topics in Health Sciences   |              |                                   |  |  |
| Rationale for Change:  |              |                                   |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course. |              |                                   |  |  |
| Proposed Changes (Check all that apply)  |              |                                   |  |  |
| Course number Units* Title De  | escription 🗸 | Prerequisite Other                |  |  |
| Complete only the fields to be changed   |              |                                   |  |  |
| FROM   | ТО           |                                   |  |  |
| Course Subject/Number  | Cours        | e Subject/Number                  |  |  |
| Units  | Units*       |                                   |  |  |
| Course Title   | Cours        | Course Title (max 100 characters) |  |  |
|  |              | si n nyfal                        |  |  |
|  |              | £                                 |  |  |
| Course Short Title   | Cours        | e Short Title (max 30 characters) |  |  |
| Description  | Descr        | ption                             |  |  |
|  |              |                                   |  |  |
|  |              |                                   |  |  |
|  |              |                                   |  |  |
| n  |              |                                   |  |  |
| Prerequisite   | Prere        | quisite                           |  |  |
| Depending on the special topic offered.  |              |                                   |  |  |
| Other  | Other        |                                   |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair                      | Signature | Date |
| N/A                                   |           |      |

### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC)  | Signature                                 | Date                 |
|--|---|----------------------|
| Tim Beischlag  | N.  | NOV 1 4 2018         |
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL                   |                      |
| Senate Graduate Studies Committee [SGSC]   | Signature                                 | Date<br>DEC 1 3 2018 |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | nly)<br>Academic Prog<br>Financial Aid Pr | ress Units:          |



# Graduate Course Change

Attach a separate document if more space is required.

| Course Subject/Number HSCI 891                 | Units 3     |                                   | Effective Term and Year Fall 2019   |  |  |
|--|-------------|-----------------------------------|-------------------------------------|--|--|
|  |             |                                   | Pail 2019                           |  |  |
| Course Title Special Topics in Health Sciences |             |                                   |                                     |  |  |
| Rationale for Change:                          |             |                                   |                                     |  |  |
| This course is open to all HSCI grad stud      | dents and   | no prer                           | equisites required for this course. |  |  |
|  |             |                                   | · · ·                               |  |  |
| Proposed Changes (Check all that apply)        |             |                                   |                                     |  |  |
| Course number Units* Title                     | Description | F                                 | Prerequisite Other                  |  |  |
| Complete only the fields to be changed         |             |                                   |                                     |  |  |
| FROM   |             | TO                                |                                     |  |  |
| Course Subject/Number                          |             | Course                            | Subject/Number                      |  |  |
| Units  |             | Units*                            |                                     |  |  |
| Course Title                                   |             | Course Title (max 100 characters) |                                     |  |  |
|  |             | 3                                 | a                                   |  |  |
|  |             |                                   |                                     |  |  |
| Course Short Title                             |             | Course                            | Short Title (max 30 characters)     |  |  |
|  |             |                                   |                                     |  |  |
| Description                                    |             | Descrip                           | tion                                |  |  |
|  |             | , î                               |                                     |  |  |
|  |             |                                   |                                     |  |  |
|  |             |                                   |                                     |  |  |
|  |             |                                   |                                     |  |  |
|  |             |                                   |                                     |  |  |
|  |             |                                   | · .                                 |  |  |
| Prerequisite                                   |             | Prerequ                           | iisite                              |  |  |
| Will depend on the special topic offered.      |             |                                   |                                     |  |  |
| Other  |             | Other                             |                                     |  |  |
|  |             |                                   |                                     |  |  |
|  |             |                                   |                                     |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date  |
|---------------------------------------|-----------|-------|
| Department Chair                      | Signature | Date  |
| N/A                                   |           | le le |

#### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC)<br>Tim Beischlag   | Signature   | Date NOV 1 4 2018    |
|--|---|----------------------|
| SENATE GRADUATE STU  | DIES COMMITTEE APPROVAL   |                      |
| Senate Graduate Studies Committee [SGSC]   | Signature   | Date<br>DEC 1 3 2018 |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | ily)<br>If different from<br>Academic Progr<br>Financial Aid Pr | ress Units:          |



# Graduate Course Change

### Attach a separate document if more space is required.

| Course Subject/Number HSCI 902  | Units 3               |                                   | Effective Term and Year Fall 2019 |  |  |  |
|---|-----------------------|-----------------------------------|-----------------------------------|--|--|--|
| Course Title Interdisciplinary Seminar in Health Sciences I   |                       |                                   |                                   |  |  |  |
| Rationale for Change:   | Rationale for Change: |                                   |                                   |  |  |  |
| This course is open to all HSCI grad students and no prerequisites required for this course.  |                       |                                   |                                   |  |  |  |
| Proposed Changes (Check all that apply)   |                       |                                   |                                   |  |  |  |
|   | Description           | <b>√</b> F                        | rerequisite Other                 |  |  |  |
| Complete only the fields to be changed  |                       |                                   |                                   |  |  |  |
| FROM  | ТО                    |                                   |                                   |  |  |  |
| Course Subject/Number   | Co                    | ourse                             | Subject/Number                    |  |  |  |
| Units   | Ur                    | Units*                            |                                   |  |  |  |
| Course Title  | Co                    | Course Title (max 100 characters) |                                   |  |  |  |
|   |                       |                                   |                                   |  |  |  |
| Course Short Title  | Co                    | ourse                             | Short Title (max 30 characters)   |  |  |  |
| Description   | De                    | escrip                            | tion                              |  |  |  |
| . *   |                       |                                   |                                   |  |  |  |
|   |                       |                                   | ж.                                |  |  |  |
|   |                       |                                   |                                   |  |  |  |
|   |                       |                                   |                                   |  |  |  |
| Prerequisite  | Pr                    | rerequ                            | lisite                            |  |  |  |
| Admission to the MSc program, or the MPH (thesis) program, or the PhD program<br>in the Faculty of Health Sciences, or consent of the instructor. |                       |                                   |                                   |  |  |  |
| Other   | Ot                    | ther                              |                                   |  |  |  |
|   |                       |                                   |                                   |  |  |  |
|   |                       |                                   |                                   |  |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program | Contact name | Contact email |
|-------------------------------|--------------|---------------|
| Faculty of Health Sciences    | Kellie Smith | kellie@sfu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee | Signature | Date |
|---------------------------------------|-----------|------|
| Department Chair<br>N/A               | Signature | Date |

#### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC)  | Signature |    |   | Date   | 14           |
|--|-----------|----|---|--------|--------------|
| Tim Beischlag  | A         |    |   |        | NOV 1 4 2018 |
| SENATE GRADUATE STU  |           |    | PROVAL  |        | 15           |
| Senate Graduate Studies Committee (SGSC)   | Signature |    | T   | Date   |              |
| Jeff Derksen   |           | M  |   |        | DEC 13 2018  |
| ,  |           | No |   |        |              |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | ıly)      | 0  | lf different from<br>Academic Progr<br>Financial Aid Pr | ess Un | its:         |



## **Graduate Course Change**

#### Attach a separate document if more space is required.

| Course Subject/Number HSCI 903                | Units 3         | Effective Term and Year Fall 2019 |  |  |
|---|-----------------|-----------------------------------|--|--|
| Course Title Interdisciplinary Seminar in Hea | Ith Sciences II | 1                                 |  |  |
| Rationale for Change:                         |                 |                                   |  |  |
| Minor edit to prerequisite.                   |                 |                                   |  |  |
|   |                 |                                   |  |  |
| Proposed Changes (Check all that apply)       |                 |                                   |  |  |
| Course number Units* Title                    | Description 🖌   | Prerequisite Other                |  |  |
| Complete only the fields to be changed        |                 |                                   |  |  |
| FROM  | ТО              |                                   |  |  |
| Course Subject/Number                         | Course          | Subject/Number                    |  |  |
| Units   | Units*          |                                   |  |  |
| Course Title                                  | Course          | Course Title (max 100 characters) |  |  |
|   |                 |                                   |  |  |
| Course Short Title                            | Course          | Short Title (max 30 characters)   |  |  |
| Description                                   | Descrip         | otion                             |  |  |
|   |                 |                                   |  |  |
| а.<br>  |                 |                                   |  |  |
| ÷.  | 8               |                                   |  |  |
|   |                 |                                   |  |  |
|   |                 |                                   |  |  |
| Prerequisite                                  | Prereq          | uisite                            |  |  |
| HSCI 902 or consent of the instructor.        | HSCI            | 902.                              |  |  |
| Other   | Other           |                                   |  |  |
|   |                 |                                   |  |  |
|   |                 |                                   |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

#### CONTACT PERSON Department / School / Program Contact name Contact email Kellie Smith Faculty of Health Sciences kellie@sfu.ca DEPARTMENTAL APPROVAL Department Graduate Program Committee Signature Date Department Chair Signature Date N/A FACULTY APPROVAL Faculty Graduate Studies Committee (FGSC) Signature Date NOV 1 4 2018 Tim Beischlag SENATE GRADUATE STUDIES COMMITTEE APPROVAL Senate Graduate Studies Committee (SGSC) Signature Date DEC 1 3 2018 Jeff Derksen ADMINISTRATIVE SECTION (for DGS office only) If different from regular units: Course Attribute: Academic Progress Units: Course Attribute Value: \_ Financial Aid Progress Units: Instruction Mode: \_\_\_\_ Attendance Type: \_



#### MEMO

Faculty of Science

ATTENTION Dr. Jeff Derksen, Dean, Graduate and Postdoctoral Studies

FROM Carl Lowenberger, Associate Dean, Faculty of Science

RE Graduate Course Change STAT 650/890 to 603

DATE November 15, 2018

TIME 3:20 PM

Dear Jeff

I am submitting the paperwork to merge two graduate courses into a single course. The rationale is included in the memo from Jinko Graham.

This proposal has approved by me and by the Faculty of Science Graduate Studies committee.

Sincerely

Part Lowby

Carl Lowenberger Associate Dean-Research (Acting) Faculty of Science



faculty of science

Statistics & Actuarial Science

contact information Jinko Graham Professor T:(778) 782-3155 F:(778) 782-4368 tim@stat.sfu.ca

mailing address Dept of Stats/Actsci 8888 University Drive Burnaby, BC Canada V5A 1S6 November 10, 2018

To: Carl Lowenberger Faculty of Science Graduate Studies Committee

Re: Graduate Course Charge - STAT 650/890 to STAT 603

We propose to merge the two graduate courses, STAT 650 and STAT 890, into a single course, STAT 603, whose number is consistent with the undergraduate counterpart, STAT 403.

STAT 890 is a graduate special topics course that we are currently offering to BPK for their graduate students. STAT 650 is a service course for REM graduate students. STAT 403 is an undergraduate course for Statistics majors and minors. Merging the two graduate courses into STAT 603 will enable the department to reclaim the 890 course number for Special Topics courses targeted to our own graduate students.

The proposal is in keeping with our Department's objective to facilitate more quantitative research expertise across the university at the graduate level.

This proposal is to be presented to the Faculty of Science Graduate Curriculum Committee for consideration.

The course was approved by the Department of Statistics and Actuarial Science at the September 14/2018 Departmental meeting.

promo Anchon

Jinko Graham Graduate Chair, Stats/ActSci



# **Graduate Course Change**

Attach a separate document if more space is required.

| Course Subject/Number STAT 650  | Units 5  |  | Effective Term and Year Fall 2019   |  |  |
|---|--|--|---|--|--|
| Course Title Quantitative Analysis in Resource Management and Field Biology   |  |  |   |  |  |
| Rationale for Change:   |  |  | 1. ARM 1.   |  |  |
| see attached  |  |  |   |  |  |
|   |  |  |   |  |  |
| Proposed Changes (Check all that apply)   |  |  |   |  |  |
| Course number 🗌 Units* 🗹 Title 🗸  | Description  | n 🔽 F                                  | Prerequisite 🗸 Other Equivalency  |  |  |
| Complete only the fields to be changed  |  |  |   |  |  |
| FROM  |  | то                                     |   |  |  |
| Course Subject/Number STAT 650  |  | Course                                 | Subject/Number STAT 603   |  |  |
| Units   |  | Units*                                 |   |  |  |
| Course Title  |  | Course Title (max 100 characters)      |   |  |  |
| Quantitative Analysis in Resource Management and Quantitativield Biology  |  |  | ntitative Analysis of Research Studies.   |  |  |
|   |  |  |   |  |  |
| Course Short Title  |  | Course Short Title (max 30 characters) |   |  |  |
| Quantitative Analysis   |  |  | tative Analysis   |  |  |
| Description   |  | Descrip                                | tion  |  |  |
| The use of statistical techniques and<br>mathematical models in resource management<br>with special emphasis on experimentation,<br>survey techniques, and statistical model<br>construction. |  |  | The use of statistical techniques and<br>mathematical models in field research with<br>special emphasis on experimentation, survey<br>techniques, and statistical model construction. |  |  |
|   | and the second |  | ·   |  |  |
| Prerequisite  |  | Prerequ                                |   |  |  |
| A course in parametric or nonparametric s   | statistics.  | A course in statistics                 |   |  |  |
| Other   |  | Other                                  |   |  |  |
|   |  |  | ts may not obtain credit for STAT603 if they have credit for STAT403.   |  |  |

\* Program requirements may need to be revised when course units are changed. Please review the calendar and submit any relevant program revisions resulting from this course change.

Page 1 of 2 Revised May 2015

#### CONTACT PERSON

| Department / School / Program    | Contact name | Contact email  |
|----------------------------------|--------------|----------------|
| Statistics and Actuarial Science | Jinko Graham | jgraham@sſu.ca |

#### DEPARTMENTAL APPROVAL

| Department Graduate Program Committee<br>Jinko Graham | Signature miles Making | Date<br>November 10, 2018 |
|---|------------------------|---------------------------|
| Department Chair<br>Tom Loughin                       | Signature              | Date<br>J3NOV 18          |

#### FACULTY APPROVAL

| Faculty Graduate Studies Committee (FGSC) | Signature / | Date |      | 1.0 |
|---|-------------|------|------|-----|
| Carl Lowenberger                          | Cart        | Nov  | 15 1 | 18. |

#### SENATE GRADUATE STUDIES COMMITTEE APPROVAL

| Senate Graduate Studies Committee (SGSC)   | Signature | m |               | Date   |
|--|-----------|---|---------------|--|
| Jeff Derksen   |           | M |               | DEC 1 3 2018                                       |
| ADMINISTRATIVE SECTION (for DGS office or<br>Course Attribute:<br>Course Attribute Value:<br>Instruction Mode:<br>Attendance Type: | əly]      | ſ | Academic Prog | m regular units:<br>jress Units:<br>rogress Units: |

## Rationale for Change

- We currently have 2 graduate courses Stat890 (4 credit hours, Special Topics) and Stat650 (5 credit hours, Quantitative Analysis in Resource Management and Field Biology) and one undergraduate course Stat403 (3 credit hours, Intermediate Sampling and Experimental Design) that are taught together.
- The graduate students meet with the instructor and TA for an extra hour each per week. They also work with domain-specific data examples in assignments and complete an extra project relevant to their research area.
- Stat890 is a graduate service course for BPK and Stat650 is a graduate service course for REM. Stat403 is an undergraduate course for Statistics majors and minors.
- We propose to merge the two graduate courses, Stat890 and Stat650, into a single course, Stat603, whose number is consistent with the undergraduate counterpart Stat403.
- Merging the graduate courses in Stat603 will enable the department to reclaim the Stat890 number for Special Topics courses targeted to our own graduate students.
- The Graduate Program Chairs of BPK and Statistics and Actuarial Science have discussed the proposed changes in detail. BPK is fine with the proposed changes, including the increase from 4 to 5 credit hours for the same proposed graduate course as REM (Stat603). The next instructor of this course, Dr. Jack Davis, is working with BPK to integrate relevant data examples and statistical software for their graduate students.
- BPK's approval allows us to reclaim the Stat890 number for non-service, specialtopics graduate courses and have both the BPK and REM graduate students taking the proposed Stat603.
- Our department approved the proposed changes on September 14, 2018. We have also worked with Daria Babeshko in Graduate Studies to fine tune the content of the form for approval.