**Course Outline Review** 

**SQC Report**

**School of [Name]**

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| --- | --- |
| Program Name and Credential: |  |
| Course Name: |  |
| Course Author(s): |  |
| Date Reviewed: |  |
| Committee Members Present: |  |

**Course Outline Review**

The SQC reviews course outlines for new degree or graduate (Master’s and Graduate Certificate) level courses (usually all courses numbered 5000 or higher). The review and feedback focus on clarity of the course description, rigour of learning outcomes as related to the intended course level, appropriateness of prerequisites, evaluation criteria and learning resources, accuracy of course credits and hours, and general completeness of information as indicated in the course outline template.

The Chair provides feedback to the program area in a brief report, which accompanies the course outline when submitted through the Electronic Course/Program Update Form.

1. [ ]  **Rationale for New Course** (clear rationale, alignment with program goals)

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| SQC Comments: | Program Response: |

1. [ ]  **Course Name and Number**

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| SQC Comments: | Program Response: |

1. [ ]  **Credits / Delivery Type** (credit calculation, delivery type aligns with course content)

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| SQC Comments: | Program Response: |

1. [ ]  **Pre-requisites**

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| SQC Comments: | Program Response: |

1. [ ]  **Course Description**

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| SQC Comments: | Program Response: |

1. [ ]  **Learning Outcomes** (clear expectations, appropriate rigour for proposed course number, stated in measurable/observable language)

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| SQC Comments: | Program Response: |

1. [ ]  **Evaluation Criteria** (alignment with learning outcomes)

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| SQC Comments: | Program Response: |

1. [ ]  **Learning Resources**

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| SQC Comments: | Program Response: |

**Overall Comments:**

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| **School Quality Committee Recommendations:** [ ]  The issues and concerns itemized above need to be considered and addressed, and a response submitted by the Program Champion.  [ ]  The SQC endorses the Course Outline. |

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| Prepared by:  |  | Date: |  |
|  | *School Quality Committee Chair* |  |  |
|  |  |  |  |
| Approved by: |  | Date |  |
|  | *Dean*  |  |  |