

**APPENDIX 3**  
**GRADUATE COURSE DELETION**  
**FACULTY OF LAW GRADUATE COMMITTEE**  
**SCHOOL OF GRADUATE STUDIES AND POSTDOCTORAL AFFAIRS**  
**Curriculum Submission**

**COURSE CODE/NUMBER:**

Submission Contact Name:

Phone #:

Email:

Date:

Signature of Associate Dean (Graduate Studies and Research): \_\_\_\_\_

**\*\* For EACH course deletion, please complete the section above AND items 1 through 4.**

1. Course number and title: Note that this number may not be reused for five years.
  
2. Reason for deletion: Provide a detailed rationale for this deletion, eg. staffing, resources, archaism, replacement by new course(s), etc.
  
3. Impact inside of department: How will this deletion affect the department/program?
  
4. Impact outside of department: Will this deletion have any impact on programs offered by other Graduate Departments/Programs and/or students in other Graduate Departments/Programs? If so, please indicate the impact and indicate which departments(s) or program(s) have been contacted