

**SCHOOL OF GRADUATE STUDIES  
GRADUATE DEGREE PROGRAM REVISION  
FOR APPROVAL BY  
GRADUATE COMMITTEE FOR BUSINESS**

**DEGREE PROGRAM NAME:** \_\_\_\_\_

**Degree program revisions** should be submitted whenever a course addition, course deletion or course revision affects the graduate degree program requirements OR whenever a minor change to the current degree program requirements is proposed.

1. Description of Change: Indicate the degree program and/or SGS Calendar section to be revised.
2. Rationale: Provide a detailed justification explaining the proposed change(s).
3. Calendar copy
4. Timing: Please provide dates when these changes will come into effect. Describe how you will ensure that students who began their plans before this change will be allowed to continue in their plans (grandparenting arrangements).
5. Resources: If these changes will affect specific resource requirements in terms of rooms,