

APPLICATION FOR DEGREE GRANTING DESIGNATION

Client Code – Office Use Only

INSTRUCTIONS

- Please read the detailed instructions before completing this form.
- Complete all sections (type or print) and sign and date the form.
- Send the form and attached documents to the University Relations Branch, New Brunswick Department of Post-Secondary Education, Training and Labour:
 - By mail: P.O. Box 6000, Fredericton, New Brunswick E3B 5H1, or
 - By Courier: 500 Beaverbrook Court, Suite 151, Fredericton, New Brunswick E3B 5X4

DETAILED INSTRUCTIONS

Definitions

For the purposes of this application:

“Applicant” means the educational institution applying for designation.

“Act” means the *Degree Granting Act*.

“Partner” means a post-secondary educational institution or company contributing directly to the delivery of the program.

“Program” means the program in respect of which the application for designation is being submitted.

“URB” means the University Relations Branch of the New Brunswick Department of Post-Secondary Education and Training.

“Regulation” means the General Regulation - Degree Granting Act.

PART I – DESCRIPTION OF APPLICANT

In this part, the applicant is asked to identify itself, confirm that it is duly incorporated, and provide the necessary contact information. Applications may be submitted by institutions in the process of becoming incorporated, and in such cases, the Minister’s recommendation respecting designation will be withheld until the URB receives the certificate of incorporation.

1.1 Name and Title of Applicant’s Agent

Indicate the name and title of the person duly authorized to apply for designation on behalf of the company. This person will henceforth receive all correspondence relating to the application.

1.2 Telephone

Give the telephone number (including the area code) at which the URB can contact the applicant’s agent. For overseas numbers, please indicate the country code.

1.3 Fax

Give the number (including the area code) at which the applicant’s agent can receive documents from the URB by fax. In the case of telephone numbers. For overseas numbers, please indicate the country code.

1.4 E-mail

Give the e-mail address at which the applicant’s agent can receive messages from New Brunswick government officials.

1.5 Web site

Give the full Web site address for the company and/or the program.

1.6 Incorporation of Applicant

Indicate the name, the year of incorporation, and the applicant’s corporation number. You are also required to attach a copy of the applicant’s letters patent and certificate of incorporation.

1.7 Business Name or Trademark

If the applicant is generally known by a business name different from its corporate name, or if it plans to use a business name different from its corporate name in its advertising or marketing initiatives, write that name here. If the business name is the same as the corporate name, just write “Same as corporate name.” If the company is owned by or affiliated with another company, indicate that relationship as well, e.g., “Company X, owned by (or affiliated with) Company Y.”

1.8 Applicant’s Mailing Address

Give the mailing address to which all URB correspondence with the applicant’s agent should be sent.

1.9 Applicant’s Civic Address

If the applicant has a civic address different from its mailing address, write that address here. If the civic address is the same as the mailing address, just write “Same as mailing address.”

1.10 Civic Address of New Brunswick Offices

If the proposed program is delivered from offices located in New Brunswick and having a civic address different from the company’s mailing or civic address, write that address here. If the address is the same as the company’s civic or mailing address, just write “Same as mailing address” or “Same as company’s civic address.” N.B.: The Act requires that all designated institutions be located in New Brunswick.

PART II – APPLICANT’S BACKGROUND

This part deals with the experience of the applicant and its employees, both in related fields and in the delivery of post-secondary programs.

2.1 Related Experience

Describe the experience of the applicant’s employees (other than in the delivery of post-secondary programs) that is directly related to the proposed program, e.g., work experience in the program field, teaching experience, juried research papers or scientific articles, management of training programs, teacher training, technical expertise in support infrastructure for teaching or research, etc. If the space provided on the form is insufficient, you may attach a complete description in a similar format.

2.2 Other Post-Secondary Programs Offered by Applicant

Describe any college- or university-level programs offered by the company or its subsidiaries or partners, either currently or in the past.

2.2.1 Program Title(s)

Give the full title of each program and indicate whether it is a college- or university-level program. Programs leading to a bachelor’s degree, a master’s degree, or a doctorate are considered university-level programs, so no further indication of level is required. For example, you may write “Bachelor of Arts in Literature,” “College Diploma in Automotive Mechanics,” “Undergraduate Certificate in Business Administration,” etc.

2.2.2 Year(s) of Operation

Indicate the number of consecutive academic years in which the program has been offered, as well as the first and last years, e.g., “5 years (1995-2000).”

2.2.3 Number of Graduates

Indicate the number of degrees granted during the above-mentioned years of operation.

2.2.4 Location or Jurisdiction

Indicate where the students took the program or which governmental jurisdiction authorized and regulated its delivery. If the program was offered in several locations, indicate the main ones and add “et al.” If the program was offered on line for a widely distributed clientele, write “On line, wide distribution” and indicate where the main IT support resources were located.

PART III – PROFILE OF PROPOSED PROGRAM OF STUDY

This part deals briefly with the proposed program.

3.1 Title of Program and Degree Credential Awarded

Indicate the title of the program and the degree credential awarded, if different. Subparagraph 3(1)(a)(ii) of the Regulation requires that an appropriate degree credential be awarded to program graduates. For instance, you would write “Bachelor of Information Technology Management” if the program and degree credential have the same title, and “Graduate Program in Business Administration, MBA” if the program and the degree credential have different titles.

3.2 Brief Description of Program

Give a brief overview of the program, including the level (undergraduate, master’s, or doctoral program), the objectives and learner outcomes, the main source of student recruitment, the admission criteria, the curriculum, the total number of credits and the corresponding number of course hours, the main employment opportunities for graduates, etc.

3.3 Occupation or Industry Related Programs

If the proposed program relates to a certified occupation or a particular industry, complete this part. Otherwise, just write “Not applicable” in boxes 3.3.1, 3.3.2, and 3.3.3.

3.3.1 Occupation or Industry

Name the occupation or industry to which the program relates.

3.3.2 Consultations

Describe any consultations with the occupation or industry in question, including the work of the advisory group. If the occupational or industrial training is regulated by a government agency or professional association, attach the program accreditation certificate.

3.3.3 Advisory Group

According to section 3 of the Regulation, an advisory group of employers and practitioners must be set up for any program related to a particular industry. Describe the full composition of the group, stating the names of all members and indicating whether they represent employers or practitioners.

3.4 Courses

Describe the courses that make up the program. If the space provided on the form is insufficient, please attach a complete list of courses in a similar format.

3.4.1 Codes

List the codes assigned to all courses. The codes should indicate the level of each course and its relationship to the other courses offered, e.g., PS-3000 for a third-year university Political Science course. Normally, undergraduate courses are coded from 1000 to 5000, whereas 6000 codes are reserved for master’s courses, and courses coded 7000 or higher are master’s or doctoral courses.

3.4.2 Title

Give the full course title.

3.4.3 Content Description

Describe the course content, including the main subject matter taught, the teaching approach, and the instructional objectives. Indicate whether the course has any prerequisites or is a prerequisite for another course.

3.4.4 Delivery Method

Name the main delivery method for each course, e.g., "lecture method" for a course taught by a professor in a classroom, or "on line" for a fully computerized course delivered via the Internet. Please note that this column is for the course delivery method, not the teaching approach, which must be explained under Content Description.

3.4.5 Credits

Indicate how many credits are awarded to students who successfully complete the course.

3.4.6 Status

Indicate whether the course is compulsory or optional.

3.5 Faculty

Provide a list of program faculty members, including their education and fields of specialization, as well as the courses taught by each. At the time the form is submitted, the applicant must be able to provide the names and qualifications of the professors teaching all courses to be offered in the first year of operation. Together with the form, the applicant must submit proof that each professor has duly accepted the teaching load assigned to him/her. A letter of intent signed by the professor constitutes sufficient proof.

3.5.1 Name

Give the full name of each professor assigned to teach a course in the program.

3.5.2 Degree

Indicate the highest degree held by each professor, as well as the name of the university that granted it, e.g., "Ph.D. in Literature (Sorbonne)."

3.5.3 Field of Specialization

Name the specific field in which each professor excels by virtue of his/her previous experience, education, or juried research. Normally, this field should be directly related to the program field or to the content of one or more courses in the program.

3.5.4 Courses Taught

Indicate the codes of the courses to be assigned to each professor. These codes must be the same as the ones listed in column 3.4.1.

3.5.5 Other Institutions

Give the names of other post-secondary or research institutions with which each professor is affiliated as a teacher, administrator, or researcher.

3.6 Involvement of Peers and External Experts

Describe the involvement of peers and external experts in the development of the proposed program. These individuals may be experts in education, in the program field, in program assessment, or in any other relevant field, who have no family or business ties with the applicant and no interests in the proposed program. Involvement of peers and external experts in the development of the program is required by the Regulation.

3.6.1 Name

Give the full name of each peer or external expert who has contributed to the development of the program.

3.6.2 Field of Expertise

Indicate the main field of expertise of each peer or independent expert.

3.6.3 Contribution

Indicate the nature and scope of the contribution of each peer or external expert.

3.7 Academic Freedom, Inquiry, and Research

According to the Regulation, the applicant must agree to provide its academic staff with the time and institutional support needed to engage in academic inquiry and research, and it must demonstrate that it adheres to the principles of academic freedom. Describe the mechanisms and processes put in place by the applicant to fulfill those obligations, including internal policies or guidelines, contractual commitments, designations of responsibilities, and investments of resources. Attach all relevant documents.

PART IV – SOLEMN DECLARATION

4.1 Declaration

Read the declaration carefully and date it when you are ready to sign the form. N.B.: Making a false statement is an offence punishable under Part II of the *Provincial Offences Procedure Act* as a category E offence.

4.2 Signatures

The applicant's agent named in box 1.1 must sign the form in the space provided. That signature cannot be delegated to an agent other than the one named in box 1.1. The agent's signature must be accompanied by that of a disinterested witness, preferably a commissioner of oaths.

4.3 Seal

Affix the company's corporate seal here. The seal must be that of the company named in box 1.6 and must match the attached letters patent and certificate of incorporation.

REMINDERS

Please note that under the *Degree Granting Act*:

- The designation is for a term of ten years.
- The designation may be renewed for subsequent terms of ten years.
- Programs for which a designation has been issued must be reassessed every five years.
- The designated institution must ensure that the programs remain in compliance with the designation order and the criteria set out in section 3 of the Regulation at all times.
- The Minister of Post-Secondary Education and Training may appoint inspectors and order a full inspection of any designated institution.
- The Minister may revoke the designation if he or she finds that an educational institution is no longer in compliance with the designation order or the criteria in section 3 of the Regulation.

PART I – DESCRIPTION OF APPLICANT

1.1 Name and Title of Applicant's Agent			1.2 Telephone		1.3 Fax	
			1.4 E-mail		1.5 Web Site	
1.6 Incorporation of Applicant						
NAME:						
YEAR:			NUMBER:			
1.7 Business Name or Trademark (if different from corporate name)						
1.8 Applicant's Mailing Address		1.9 Applicant's Civic Address (if different from mailing address)			1.10 Civic Address of New Brunswick Offices (if different from applicant's civic and mailing addresses)	

PART II – APPLICANT'S BACKGROUND

2.1 Related Experience			
2.2 Other Post-Secondary Programs Offered by Applicant			
2.2.1 Program Title(s)	2.2.2 Year(s) of Operation	2.2.3 Number of Graduates	2.2.4 Location or Jurisdiction
1.			
2.			
3.			
4.			
5.			
6.			

3.5 Faculty					
3.5.1 Name	3.5.2 Degree	3.5.3 Field of Specialization	3.5.4 Courses Taught	3.5.5 Other Institutions	3.5.6 Years of Experience

3.6 Involvement of Peers and External Experts		
3.6.1 Name	3.6.2 Field of Expertise	3.6.3 Contribution

3.7 Academic Freedom, Inquiry, and Research

PART IV – SOLEMN DECLARATION

4.1 Declaration

The undersigned hereby attests that he/she is duly authorized to apply for designation under the *Degree Granting Act* on behalf of the applicant; that he/she has read and understood the *Degree Granting Act*, the *General Regulation* thereunder, and the instructions on this form; that the information given on this form and all corollary information supplied to the Minister of Post-Secondary Education and Training and his representatives is true and meets the requirements of the *Degree Granting Act*; that an assessment of the program(s) has been done in accordance with the instructions of the Minister of Post-Secondary Education and Training; and that, to the best of his/her knowledge, the program submitted is in full compliance with the requirements set out in section 3 of the *General Regulation - Degree Granting Act*, in witness whereof the undersigned has attached a cheque or money order in the amount of \$250, made out to the Minister of Finance of New Brunswick and dated _____ to the duly completed form.

4.2 Signature	4.3 Seal
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<p>_____</p> <p>Signature of Applicant's Agent</p> <p>_____</p> <p>Signature of Witness or Commissioner of Oaths</p>	
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