**Subcommittee on Undergraduate Academic Courses (SOC)  
Fast Track Request Template**

The Fast Track Request Form may only be used to submit time-sensitive requests for changes to course pre- and anti-requisites to resolve issues negatively impacting course registration.

Fast Track requests to SOC are submitted by the Dean’s Office as an MS Word document to the Secretariat at [soc\_submissions@uwo.ca](mailto:soc_submissions@uwo.ca). Please note that **only one form per motion may be submitted.** Similar course pre- and anti- requisites changes may be grouped together.

**When a Fast Track request is received:**

Fast Track requests received by the Secretariat are submitted to the SOC Subcommittee for Fast Track Requests for e-approval. Please note that:

* Fast track requests may take 5 business days to process.
* Incomplete proposals will be returned to the Dean’s Office with feedback for resubmission.

Approved Fast Track proposals will be reported to SOC for information at its next meeting.

The Office of the Registrar hosts the official version of the Academic Calendar electronically on the University’s website. Once approved by SOC, revised course pre- and anti-requisites will be promptly updated in the calendar.

When submitting the proposal, please remove the italicized instructions from the document.

**This Submission is for** (please check all that apply):

Revision to Course(s) Prerequisites  Revision to Course(s) Antirequisites

**Subject:** *Insert the revision of course pre- and anti-requisites.*

**Motion:** *Include effective date, proposal, and Faculty/School/Affiliate University college to offer the course.*

**Rationale:** *Give a brief statement about the reasons for the proposal including why a time-sensitive request for changes to course pre- and anti-requisites is necessary to resolve issues negatively impacting course registration.*

**Link to Current Calendar Copy:** *Provide the link to the current calendar copy.*

**Proposed Calendar Copy (for approval):** *Provide the revised calendar copy.*

**Associate Dean – Undergraduate (or Equivalent) Contact:** *Include their name, role, Faculty/School/Affiliate, and email address.*

**Department/Program Contact:***If there is a department or program level contact for the proposal, please include their name, role, department/program, and email address. If there is no departmental/program contact, delete this item.*