**System Dynamics Course Listing Survey**

Please email [office@systemdynamics.org](mailto:office@systemdynamics.org)

**DO NOT Use All Caps**

|  |  |
| --- | --- |
| **Contact email** | |
| Your email address |  |
| **University description** | |
| Department name |  |
| URL of department |  |
| University name |  |
| URL of university |  |
| Street address |  |
| City |  |
| State (or province) |  |
| Zipcode (or postal code) |  |
| Country |  |
| **Instructor descriptions** | |
| **Instructor 1** | |
| Instructor 1 Name |  |
| Instructor 1 Personal URL |  |
| Instructor 1 Title |  |
| Instructor 1 Department |  |
| Instructor 1 Language(s) used for teaching |  |
| Instructor 1 Email |  |
| Instructor 1 Telephone |  |
| Instructor 1 Fax |  |
| **Instructor 2** | |
| Instructor 2 Name |  |
| Instructor 2 Personal URL |  |
| Instructor 2 Title |  |
| Instructor 2 Department |  |
| Instructor 2 Language(s) used for teaching |  |
| Instructor 2 Email |  |
| Instructor 2 Telephone |  |
| Instructor 2 Fax |  |
| **Instructor 3** | |
| Instructor 3 Name |  |
| Instructor 3 Personal URL |  |
| Instructor 3 Title |  |
| Instructor 3 Department |  |
| Instructor 3 Language(s) used for teaching |  |
| Instructor 3 Email |  |
| Instructor 3 Telephone |  |
| Instructor 3 Fax |  |
| **Instructor 4** | |
| Instructor 4 Name |  |
| Instructor 4 Personal URL |  |
| Instructor 4 Title |  |
| Instructor 4 Department |  |
| Instructor 4 Language(s) used for teaching |  |
| Instructor 4 Email |  |
| Instructor 4 Telephone |  |
| Instructor 4 Fax |  |
| **Instructor 5** | |
| Instructor 5 Name |  |
| Instructor 5 Personal URL |  |
| Instructor 5 Title |  |
| Instructor 5 Department |  |
| Instructor 5 Language(s) used for teaching |  |
| Instructor 5 Email |  |
| Instructor 5 Telephone |  |
| Instructor 5 Fax |  |
| **Program descriptions** | |
| Program 1 | Program Title:  Program URL:  If this program is a degree program? (Yes/No)  If this program is a certificate program? (Yes/No)  If this program is a System Dynamics specific program? (Yes/No) |
| Program 2 | Program Title:  Program URL:  If this program is a degree program? (Yes/No)  If this program is a certificate program? (Yes/No)  If this program is a System Dynamics specific program? (Yes/No) |
| Program 3 | Program Title:  Program URL:  If this program is a degree program? (Yes/No)  If this program is a certificate program? (Yes/No)  If this program is a System Dynamics specific program? (Yes/No) |
| **Course descriptions** | |
| **Course 1** | |
| Course 1 Title |  |
| Course 1 URL |  |
| Course 1 Associated Program(s) (one or more programs listed above) |  |
| Course 1 Levels (Undergrad/Graduate/Postgraduate/All Levels) |  |
| Course 1 Term (Fall/Spring/Summer/Varies) |  |
| Course 1 Hrs/Week (hours, credits, units, etc...) |  |
| Course 1 # of Students |  |
| Course 1 Fax: |  |
| Course 1 Texts (an academic citation style such as APA is preferable) |  |
| **Course 2** | |
| Course 2 Title |  |
| Course 2 URL |  |
| Course 2 Associated Program(s) (one or more programs listed above) |  |
| Course 2 Levels (Undergrad/Graduate/Postgraduate/All Levels) |  |
| Course 2 Term (Fall/Spring/Summer/Varies) |  |
| Course 2 Hrs/Week (hours, credits, units, etc...) |  |
| Course 2 # of Students |  |
| Course 2 Fax: |  |
| Course 2 Texts (an academic citation style such as APA is preferable) |  |
| **Course 3** | |
| Course 3 Title |  |
| Course 3 URL |  |
| Course 3 Associated Program(s) (one or more programs listed above) |  |
| Course 3 Levels (Undergrad/Graduate/Postgraduate/All Levels) |  |
| Course 3 Term (Fall/Spring/Summer/Varies) |  |
| Course 3 Hrs/Week (hours, credits, units, etc...) |  |
| Course 3 # of Students |  |
| Course 3 Fax: |  |
| Course 3 Texts (an academic citation style such as APA is preferable) |  |
| **Course 4** | |
| Course 4 Title |  |
| Course 4 URL |  |
| Course 4 Associated Program(s) (one or more programs listed above) |  |
| Course 4 Levels (Undergrad/Graduate/Postgraduate/All Levels) |  |
| Course 4 Term (Fall/Spring/Summer/Varies) |  |
| Course 4 Hrs/Week (hours, credits, units, etc...) |  |
| Course 4 # of Students |  |
| Course 4 Fax: |  |
| Course 4 Texts (an academic citation style such as APA is preferable) |  |
| **Course 5** | |
| Course 5 Title |  |
| Course 5 URL |  |
| Course 5 Associated Program(s) (one or more programs listed above) |  |
| Course 5 Levels (Undergrad/Graduate/Postgraduate/All Levels) |  |
| Course 5 Term (Fall/Spring/Summer/Varies) |  |
| Course 5 Hrs/Week (hours, credits, units, etc...) |  |
| Course 5 # of Students |  |
| Course 5 Fax: |  |
| Course 5 Texts (an academic citation style such as APA is preferable) |  |