



Course Approval Form

For approval of new courses and deletions or modifications to an existing course.

registrar.gmu.edu/facultystaff/curriculum

Action Requested:

Create new course Inactivate existing course

Modify existing course (check all that apply)

Title Credits Repeat Status Grade Type

Prereq/coreq Schedule Type Restrictions

Other: _____

Course Level:

Undergraduate

Graduate

College/School: **Department:**

Submitted by: **Ext:** **Email:**

Subject Code: **Number:** **Effective Term:** Fall
 Spring Year
 Summer

(Do not list multiple codes or numbers. Each course proposal must have a separate form.)

Title: Current
Banner (30 characters max including spaces) _____
New

Credits: Fixed or
 Variable

Repeat Status: Not Repeatable (NR)
 Repeatable within degree (RD) Maximum credits allowed:
 Repeatable within term (RT)

Grade Mode: Regular (A, B, C, etc.)
 Satisfactory/No Credit
 Special (A, B C, etc. +IP)

Schedule Type: Lecture (LEC)
 Lab (LAB)
 Recitation (RCT)
 Internship (INT)

Independent Study (IND)
 Seminar (SEM)
 Studio (STU)

Prerequisite(s):

Corequisite(s):

Instructional Mode: 100% face-to-face
 Hybrid: ≤ 50% electronically delivered
 100% electronically delivered

Restrictions Enforced by System: Major, College, Degree, Program, etc. Include Code.

Are there equivalent course(s)?
 Yes No
If yes, please list _____

Catalog Copy for NEW Courses Only (Consult University Catalog for models)

Description (No more than 60 words, use verb phrases and present tense)	Notes (List additional information for the course)
<input type="text"/>	<input type="text"/>

Indicate number of contact hours: _____ Hours of Lecture or Seminar per week: _____ Hours of Lab or Studio: _____

When Offered: (check all that apply) Fall Summer Spring

Approval Signatures

Department Approval _____ Date _____ College/School Approval _____ Date _____

If this course includes subject matter currently dealt with by any other units, the originating department must circulate this proposal for review by those units and obtain the necessary signatures prior to submission. Failure to do so will delay action on this proposal.

Unit Name	Unit Approval Name	Unit Approver's Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

For Graduate Courses Only

Graduate Council Member

Provost Office

Graduate Council Approval Date

For Registrar Office's Use Only: Banner _____ Catalog _____

revised 11/8/11

Summary and Justification for Renaming CDS 410:

CDS 410 is cross-listed with (and hence, identical to) the MATH 447: Numerical Analysis II.
