

## **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  X Modify existing course (check all Title	Repeat Status		urse Level: Undergraduate Graduate
College/School: COS Submitted by: G. L. R. WEATI			Y & BIOCHEMISTRY mail: grobert1@gmu.edu
Subject Code: CHEM Nu (Do not list multiple codes or numbers. Each have a separate form.)		ffective Term: X Fall Spring Summer	Year 2013
Title: Current INSTRUMENTAL Banner (30 characters max incl New	ANALYSIS LABORATORY uding spaces)		
Credits: X Fixed 2 or (check one) Variable to	Repeat Status: (check one)	Not Repeatable (NR) Repeatable within degree (R Repeatable within term (RT)	
Grade Mode: X Regular (A, B, C Satisfactory/No 6 Special (A, B C,	Credit (check one)	X Lab (LAB)	Independent Study (IND) Seminar (SEM) Studio (STU)
Prerequisite(s):	Corequisite(s):		Instructional Mode:
CHEM 211, CHEM 212, CHEM 311 CHEM 315, CHEM 314, CHEM 311 CHEM 321, CHEM 331, CHEM 331 CHEM 336, CHEM 337, CHEM 421 MATH 113, MATH 114, MATH 213 243 or PHYS 160, PHYS 260	8, 2, 2,		X 100% face-to-face Hybrid: ≤ 50% electronically delivered  100% electronically delivered
Restrictions Enforced by System "C" grade or better in CHEM 211, 0 318, CHEM 321, CHEM 331, CHE MATH 114, MATH 213, PHYS 243	CHEM 212, CHEM 313, CHEM M 332, CHEM 336, CHEM 33	и 315, CHEM 314, CHEM	Are there equivalent course(s)?  Yes X No If yes, please list
Catalog Copy for NEW Co	ureae Only (Canault Univer	sity Catalog for models)	
Description (No more than 60 words,		The same of the sa	ormation for the course)
Indicate number of contact hours: When Offered: (check all that apply)	Hours of Lecture or Sem Fall Summer	inar per week: Spring	Hours of Lab or Studio:
Approval Signatures		D 4 2 2 2 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2	
Told alike	4,16,13 Date		
Department Approval		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 Approval Name	Unit Approver's Signature	Date
For Graduata Courses	Only		