

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 Modify existing course (check a Title Prereq/coreq Other:		_	Course Level: X Undergraduate Graduate	9
College/School: COS Submitted by: G. L. R. WEA		Department: CHEMIS Ext: 3-1456	TRY & BIOCHEM Email: grobe	ISTRY t1@gmu.edu
Subject Code: CHEM Number: 452 Effective Term: X Fall (Do not list multiple codes or numbers. Each course proposal must have a separate form.) Effective Term: X Fall Spring Year 2013 Summer				
Title: Current SPECIAL PRO Banner (30 characters max in New	JECTS IN ICHEMISTRY cluding spaces)			
Credits: Fixed 0 0 1 to		X Not Repeatable (NR) Repeatable within degree Repeatable within term (credits 3
Grade Mode: X Regular (A, B, Satisfactory/No Special (A, B C	Credit (check one)	Lab (LAB)) Semina Studio (ident Study (IND) r (SEM) STU)
Prerequisite(s): CHEM 211, CHEM 212, CHEM 3 CHEM 318, CHEM 321, CHEM 3 MATH 113, MATH 114; PHYS 24 PHYS 246 OR PHYS 260	31, CHEM 336, CHEM 451,	Corequisite(s):		
Restrictions Enforced by System: Major, College, Degree, Program, etc. Include Code. "C" grade or better in CHEM 211, CHEM 212, CHEM 313, CHEM 314, CHEM 315, CHEM 315, CHEM 318, CHEM 321, CHEM 331, CHEM 336, CHEM 451, MATH 113, MATH 114; PHYS 243, PHYS 245, PHYS 246 OR PHYS 260; CHEMISTRY MAJOR/MINOR, 90 CREDIT HOURS. Are there equivalent course(s)? Yes X 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)				
Indicate number of contact hours: Hours of Lecture or Seminar per week: When Offered: (check all that apply) Fall Summer Spring				
Approval Signatures	4.16.13	KEELEN MEDIA		
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 Signatu	ure	Date
For Graduate Courses Only				
Graduate Council Member	Provost Office		Graduate Co.	ıncil Approval Date