



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 Summer

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

Title: Current

Banner (30 characters max including spaces)

New

Credits: (check one) Fixed Variable or

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

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

Schedule Type: (check one) 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 9/18/2014 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

Course Proposal Submitted to the Curriculum Committee of the College of Science

1. COURSE NUMBER AND TITLE:

Course Prerequisites:

Catalog Description:

2. COURSE JUSTIFICATION: This course is no longer being taught by the Department.

Course Objectives:

Course Necessity:

Course Relationship to Existing Programs:

Course Relationship to Existing Courses:

3. APPROVAL HISTORY: Approved by the department chair September 18, 2014

4. SCHEDULING AND PROPOSED INSTRUCTORS:

Semester of Initial Offering:

Proposed Instructors:

5. TENTATIVE SYLLABUS: