



Program Approval Form

For approval of new programs and deletions or modifications to an existing program.

Action Requested:

- Create New (SCHEV approval required except for minors)
- Inactivate Existing
- Modify Existing (check all that apply)
 - Title (SCHEV approval required except for minors)
 - Concentration** (Choose one): Add Delete Modify
 - Degree Requirements
 - Admission Standards/ Application Requirements
 - Other Changes: _____

Type (Check one):

- B.A. B.S. Minor
- M.A. M.S. M.Ed.
- Ph.D.
- Undergraduate Certificate*
- Graduate Certificate*
- Other:

College/School:
Department:

Submitted by:
Ext:
Email:

Effective Term: Spring
Please note: For students to be admitted to a new degree, minor, certificate or concentration, the program must be fully approved, entered into Banner, and published in the University Catalog.

Justification:(attach separate document if necessary)

All BIOL and CHEM courses at the 302-400 level are approved electives. This revised wording automatically excludes courses at the 500 level. It also limits other courses to science/math. (In the past we had a request that a Philosophy course be an approved elective.)

Program Title:(Required)

Title must identify subject matter. Do not include name of college/school/dept.

Concentration(s):

Admissions Standards / Application Requirements:

(Required only if different from those listed in the University Catalog)

Degree Requirements:

Consult University Catalog for models, attach separate document if necessary using track changes for modifications

Courses offered via distance: (if applicable)

TOTAL CREDITS REQUIRED:

Existing	New/Modified
B.S. in Chemistry	
Biochemistry	
NA	
9 credits of approved science electives chosen from chemistry or biology courses at 302 or above. Courses from other disciplines may be submitted as electives, subject to approval of the coordinator.	9 credits of approved science electives chosen from CHEM or BIOL 302-499. Other science or math courses may be approved as electives, subject to prior approval of the coordinator.
NA	
120	

*For Certificates Only: Indicate whether students are able to pursue on a Full-time basis Part-time basis

Approval Signatures

Department _____ Date 11/5/14
 College/School _____ Date _____
 Provost's Office _____ Date _____
 Required for Minors and Interdisciplinary Programs

If this program may impact another unit or is in collaboration with another unit at Mason, 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

For Graduate Programs Only

Graduate Council Member _____ Provost Office _____ Graduate Council Approval Date _____