

# 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: Accelerated MS

College/School: College of Science Department: Chemistry and Biochemistry  
 Submitted by: Jennifer Gettys Ext: 3-5302 Email: jbazaz@gmu.edu

Effective Term: Fall 2015 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)

Fixing an oversight from previous catalogs: adding CHEM 315 to the official list of courses required for admission.

## 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

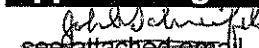
Existing	New/Modified
Chemistry BS/Chemistry, Accelerated MS	
...Additionally, they will have completed the following courses with a GPA of 3.00 or higher: CHEM 313, 314, 318, 321, 331, 336, 463, and 445 or 465	...Additionally, they will have completed the following courses with a GPA of 3.00 or higher: CHEM 313, 314, 315, 318, 321, 331, 336, 463, and 445 or 465

Courses offered via distance:  
(If applicable)

TOTAL CREDITS REQUIRED:

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

## Approval Signatures

  
 see attached email 2.23.15  
 Department \_\_\_\_\_ Date \_\_\_\_\_

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 \_\_\_\_\_

For Registrar Office's Use Only: Received \_\_\_\_\_ Banner \_\_\_\_\_ Catalog \_\_\_\_\_

revised 6/7/12