

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 ☒ Delete 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: Science Department: GGS

Submitted by: Tim Leslie Ext: 3-4336 Email: tleslie@gmu.edu

Subject Code: GGS Number: 490 Effective Term: ☒ Fall ☐ Spring ☐ Summer Year: 2016

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

Title: Current Practicum in Geographical Applications

Banner (30 characters max including spaces)

New

Credits: ☐ Fixed ☐ Variable or to

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

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

Schedule Type Code(s): ☐ 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

Special Instructions: (list restrictions for major, college, or degree; hard-coding; etc.)

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)

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

College/School Approval Date

th by any other units, the originating department must circulate this proposal for review by _____

Failure to do so will delay action on this proposal.

Unit Name	Unit Approval Name	Unit Approver's Signature	Date

For Graduate Courses Only

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

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

1. COURSE NUMBER AND TITLE:

GGS 490 – Practicum in Geographical Applications

2. CHANGE JUSTIFICATION:

We have multiple independent study courses for undergraduates (including GGS 480 - Internship). This one is unnecessary.

Approved by the GGS Curriculum Committee on Sept 8, 2015. Approved by GGS Department on October 14, 2015