



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: Removal of crosslist

Course Level:

Undergraduate

Graduate

College/School: College of Science Department: Computational and Data Science

Submitted by: Dimitris Papaconstantopoulos Ext: 3.3624 Email: dpapacon@gmu.edu

Subject Code: CSI Number: 877 Effective Term: Fall Spring Summer

(Do not list multiple codes or numbers. Each course proposal must have a separate form.) Year: 2011

Title: Current Geometrics Methods in Statistics

Banner (30 characters max including spaces) _____

New _____

Credits: (check one) Fixed _____ or _____ Variable _____ to _____

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 Code(s): (check all that apply) 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)
	Removal of STAT 877 as a crosslist
Indicate number of contact hours: _____	Hours of Lecture or Seminar per week: _____
When Offered: (check all that apply) <input type="checkbox"/> Fall <input type="checkbox"/> Summer <input type="checkbox"/> Spring	Hours of Lab or Studio: _____

Approval Signatures

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 Signature	Date

For Graduate Courses Only

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