

## **Course Approval Form**

For approval of new courses and deletions or modifications to an existing course.

registrar.gmu.edu/facultystaff/curriculum

Action Requested:		<u>Co</u> urse Level	
Create new course x Delete existing course		Undergraduate	
Modify existing course (check a		x Graduate	
Title Credit		Grade Type	
Prereq/coreq Sched	lule Type Restrictions		
Outer.			
Callaga (Callaga of Ca	:	Department: Cabaal of Customa Dial	
College/School: College of Sc Submitted by: Dan Cox	ience	Department:School of Systems BioleExt:3.4971Email:doc	
Dan Cox		<b>Ext</b> : 3.4971 <b>Email</b> : dcc	x5@gmu.edu
Subject Code: MBI  (Do not list multiple codes or numbers. Ea have a separate form.)		Effective Term: x Fall Spring Year Summer	2011
Title: Current Bioinformatics	Methds III		
Banner (30 characters max ir			
New	<u> </u>		
" <u>-</u>			
Credits: Fixed O Variable to	Check one)	Repeatable within term (RT) allowed	
Grade Mode: Regular (A, B, Cotiofactory/No	•		ent Study (IND)
(check one) Satisfactory/No Special (A, B C		Lab (LAB) Seminar ( Recitation (RCT) Studio (ST	
Special (A, B C	apply)	Internship (INT)	(3)
Prerequisite(s):	Corequisite(s):	Instruct	ional Mode:
		100%	face-to-face
		Hybrid	: ≤ 50% electronically delivered
		100%	electronically delivered
Special Instructions: (list restrictions)	ions for major, college, or degree;h	Are there Yes If yes, plea	equivalent course(s)?  No se list
		, 500, p.00	
Catalog Copy for NEW C	ourses Only (Consult Univer	rsity Catalog for models)	
<b>Description</b> (No more than 60 words			o course)
Description (No more than 60 words	s, use verb prirases and present ter	Notes (List additional information for the	e course)
Indicate number of contact hours:	Hours of Lecture or Sem	inar per week: Hours of Lab	or Studio:
When Offered: (check all that apply)		Spring	or stadio.
, , , , ,		<u> </u>	
Approval Signatures			
Approvat Signatures			
Department Approval	Date	College/School Approval	Date
		her units, the originating department must circulure to do so will delay action on this proposal.	late this proposal for review by
Unit Name	Unit Approval Name	Unit Approver's Signature	Date
			- ***
For Graduate Courses	s Only		
Graduate Council Member	Provost Office	Graduata C	council Approval Date
Graduate Courier Meriber	Flovost Office	Graudale C	Tourion Approval Date