GEORGE MASON UNIVERSITY

Course Approval Form

Action Requested:

[ ] Create new course [X] Inactivate existing course [ ] Reinstate inactive course

[ ] Modify existing course (check all that apply)

[ ] Title	[ ] Credits	[ ] Repeat Status	[ ] Grade Type
[ ] Prereq/coreq	[ ] Schedule Type	[ ] Restrictions	
[ ] Other:			

Course Level:

[ ] Undergraduate

[X] Graduate

College/School: College of Science   **Department:** Atmospheric, Oceanic, and Earth Sciences

Submitted by: Paul Schopf   **Ext:** 3.3609   **Email:** pschopf@gmu.edu

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Subject Code: GEOL   **Number:** 800   **Effective Term:**

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

[ ] Fall
[X] Spring   *Year* 2015
[ ] Summer

Title:

Current: Studies for the Doctor of Philosophy in Education

Banner (30 characters max w/ spaces):

New:

Fulfills Mason Core Req? (undergrad only)

[ ] Currently fulfills requirement

[ ] Submission in progress

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: (check one) LEC can include LAB or RCT

[ ] 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

Restrictions Enforced by System: Major, College, Degree, Program, etc**.** Include Code.

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

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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

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Course Proposal Submitted to the College of Science Curriculum Committee (COSCC)

The form above is processed by the Office of the University Registrar. This second page is for the COSCC's reference. Please complete the applicable portions of this page to clearly communicate what the form above is requesting.

COURSE INFORMATION:
- Course Number (required): GEOL 800

- Course Title (required): Studies for the Doctor of Philosophy in Education

- Course Prerequisites:

- Catalog Description:

DEPARTMENTAL APPROVAL HISTORY (required):
- Date of Departmental Approval: Approved by the chair October 28, 2014

COURSE JUSTIFICATION (for new courses):
- Course Objectives:

- Course Necessity:

- Course's Relationship to Existing Programs:

- Course's Relationship to Existing Courses:

SCHEDULING AND PROPOSED INSTRUCTORS (for new courses):
- Semester of Initial Offering:

- Proposed Instructors:

TENTATIVE SYLLABUS INSERTED BELOW (for new courses):