

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 Modify Graduate Certificate* Graduate Certificate* Other: Other Changes:					
College/School: College of Science Submitted by: Jen Gettys		ence	Department:	SSB	
			Ext: 3.5302	Email:	jbazaz@gmu.edu
Fall 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) Correctly computing the credit options based upon the courses listed.					
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Program Title: (Required) Title must identify subject matter. Do not include name of college/school/dept. Concentration(s):		Existing		New/Modified	
		SEB and NEUR			
Admissions Standards / Application Requirements: (Required only if different from those listed in the University Catalog)		NEUR			
Degree Requirements: Consult University Catalog for models, attach separate document if necessary using track changes for modifications		1. SEBCore: 12 creditsElectives: 3-12 credits 2. NEURCore: 12 creditsElectives: 5-10 credits		1. SEBCore: 13 creditsElectives: 2-11 credits 2. NEURCore: 12-13 creditsElectives: 6-13 credits	
Courses offered via distance: (if applicable)					
TOTAL CREDITS REQUIRED:		30 credits		Remains 30 credits	
*For Certificates Only: Indicate whether students are able to pursue on a Full-time basis Part-time basis					
Approval Signatures					
Department	D	ate 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 U		nit Approval Name Unit Approver's		gnature	Date
For Graduate Programs Only					
Graduate Council M	lember	Provost Office		Graduate Council Approval Date	
For Peaistrar Office's	Ilsa Only: Possie	ad Banner	Cod	talog	**************************************

Program 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.

FOR ALL PROGRAMS (required)

Program Title: Biology, MS

Date of Departmental Approval: 3/10/2015

FOR INACTIVATED PROGRAMS (required if inactivating a program)

• Reason for Inactivation:

FOR MODIFIED PROGRAMS (required if modifying a program)

- Summary of the Modification: Reflecting credit sums accurately.
- Text before Modification (title, degree requirements, etc.): See above
- Text after Modification (title, degree requirements, etc.): See above
- Reason for the Modification: Seeing that the upcoming catalog listing is correct.

FOR NEW PROGRAMS (required if creating a new program)

- Reason for the New Program:
- Relationship to Existing Programs:
- Relationship to Existing Courses:
- Semester of Initial Offering:
- Insert Tentative SCHEV Proposal Below