

Program Approval Form

For approval of new programs and deletions or modifications to an existing program.

Inactivate Exi X Modify Existin Title (SCH Concentr X Degree R	SCHEV approva sting ng (check all tha HEV approval re ration (Choose of equirements in Standards/ Ap	at apply) quired exc one):	Add Delet	e [Modi	fy			ck one): X B.S. M.S. raduate Certificate*	Minor M.Ed.	
College/School:	College of Sci	ience			Denar	tment:	Biology	,			
Submitted by:		Larry Rockwood			Ext:	3-1031	Diology	Email:	lrockwoo@	gmu.edu	
Effective Term: Fall 201		program must be fully approved, entered into Banner, and published in the University Catalog.									
Justification: (attach separate document if necessary) Correcting requirements for the concentration.											
Program Title: (Required) Title must identify subject matter. Do not include name of college/school/dept. Concentration(s):			Existing				New/Modified				
		Biology	, BS								
								Biopsychology			
								ыоръусноюду			
Admissions Standards / Application Requirements: (Required only if different from those listed in the University Catalog)											
Degree Requirements: Consult University Catalog for models, attach separate document if necessary using track changes for modifications		- 7 Additional Credits				- 3-4 Additional Credits					
Courses offered via distance: (if applicable)											
TOTAL CREDITS REQUIRED:		28-31	28-31					24-28			
*For Certificates 0	Only: Indicate	whether	students are able	to pu	ırsue on	а	Full-time	basis	Part-tim	ne basis	
				•				L			
Approval Sig	natures										
Department Da		Date	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			Approval Name Unit Approver's S								
Ont Name		THE Approval Name			Our Apployer a digital		ngnature		Date		
For Graduate	Programs	Only									
Graduate Council M	lember		Provost Office				Graduate Council Approval Date				
For Registrar Office's Use Only: Received_			Banner(Catalog revised 6/7/12				

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, BS

Date of Departmental Approval: February 27, 2015

FOR INACTIVATED PROGRAMS (required if inactivating a program)

• Reason for Inactivation:

FOR MODIFIED PROGRAMS (required if modifying a program)

- Summary of the Modification: Correcting concentration credits.
- Text before Modification (title, degree requirements, etc.):

7 Additional Credits

- Text after Modification (title, degree requirements, etc.): 3-4 Additional Credits
- Reason for the Modification: Correcting an error in previous catalog publication.

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