

Course Approval Form

For instructions see:

http://registrar.gmu.edu/facultystaff/catalog-revisions/course/

Action Requested:		Course Lev	/el:
Create new course	Inactivate existing course	X Underg	raduate
Modify existing course (check a Title Credits Prereq/coreq Sched Other:	· · · · · · · · · · · · · · · · · · ·	Grade Type Gradua	te
Callege/Caback Callege of Oa		Distance Distance	1
College/School: College of Sci Submitted by: L. Rockwood	ence	Department: Biology Ext: 3-1031	voo@gmu.edu
L. Rockwood		Ext. 3-1031 Elliali. locky	voo@gmu.euu
Subject Code: MLAB Number: 406 (Do not list multiple codes or numbers. Each course proposal must have a separate form.) Effective Term: Fall Spring Year 2016 X Summer			
Title: Current Clinical Chemistry Fulfills Mason Core Req? (undergrad only)			
Banner (30 characters max w/ spaces) Currently fulfills requirement			
New	·	Submission in progress	
Credits: Fixed O Variable to	(check one)	Not Repeatable (NR) Repeatable within degree (RD) Repeatable within term (RT) Maximum allowed:	credits 99
(check one) Satisfactory/No Special (A, B C	Credit (check one)	Lab (LAB) Seminal Recitation (RCT) Studio ((SEM)
		Internship (INT)	
Prerequisite(s):	Corequisite(s):		nal Mode:
		Hybrid:	ce-to-face 50% electronically delivered ectronically delivered
Restrictions Enforced by Syste	m: Major, College, Degree, Pr	YES, course is	(check only as applicable) s 100% equivalent to: s being renumbered the following:
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: When Offered: (check all that apply)	Hours of Lecture or Sem	inar per week: Hours of Lab or Spring	Studio:
Approval Signatures			
Approver orginatures			
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
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For Graduate Courses Only			
Graduate Council Member	Provost Office	Graduate Co	uncil Approval Date
For Registrar Office's Use Only: BannerCatalog revised 6/22/15			

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.

FOR ALL COURSES (required)

Course Number and Title:

MLAB 401 - Orientation to the Problems and Practices of the Clinical Laboratory

MLAB 402 - Clinical Hematology and Coagulation

MLAB 403 - Clinical Microscopy

MLAB 404 - Serology and Immunohematology

MLAB 405 - Clinical Microbiology

MLAB 406 - Clinical Chemistry

Date of Departmental Approval: June 27, 2016

FOR INACTIVATED/REINSTATED COURSES (required if inactivating/reinstating a course)

Reason for Inactivating/Reinstating:

FOR MODIFIED COURSES (required if modifying a course)

Summary of the Modification:

The Department of Biology requests that the maximum credits allowed be modified to 99 to allow more flexibility when it comes to off-campus hospital work.

- Text before Modification (title, repeat status, catalog description, etc.):
 8 maximum credits allowed.
- Text after Modification (title, repeat status, catalog description, etc.):
 99 maximum credits allowed.
- Reason for the Modification:
 To reduce the number of exceptions needed on a case by case basis.

FOR NEW COURSES (required if creating a new course)

- Reason for the New Course:
- Relationship to Existing Programs:
- Relationship to Existing Courses:
- Semester of Initial Offering:
- Proposed Instructors:
- Insert Tentative Syllabus Below