George Mason University  
Graduate Course Approval/Inventory Form

Please complete this form and attach a copy of the syllabus for new courses. Forward it as an email attachment to the Secretary of the Graduate Council. A printed copy of the form with signatures should be brought to the Graduate Council Meeting. Complete the Coordinator Form on page 2, if changes in this course will affect other units.

Please indicate: _____ NEW  ___x_ MODIFY  ____ DELETE

Local Unit: Communication  Graduate Council Approval Date:

Course Abbreviation:  Course Number: COMM 653

Full Course Title: Graduate Communication: Research and Teaching

Abbreviated Course Title (24 characters max.):

Credit hours: 3  Program of Record:

Repeatable for Credit? ___ D=Yes, not within same term  _______ Up to hours
___ T=Yes, within the same term  _______ Up to _______ hours
___ N=Cannot be repeated for credit

Activity Code (please indicate):  _____ Lecture (LEC)  _____ Lab (LAB)  _____ Recitation (RCT)
_____ Studio (STU)  _____ Internship (INT)  _____ Independent Study (IND) ___x__ Seminar (SEM)

Catalog Credit Format  3:3:3  Course Level: GF(500-600) __653__ GA(700+) ___

Maximum Enrollment: 20  For NEW courses, first term to be offered:

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses:

For MODIFIED or DELETED courses as appropriate:

Last term offered: F04  Previous Course Abbreviation:  Previous number:

Description of modification:

Request to change title from COMM 653: Teaching College Communication to reflect a more appropriate course name: COMM 653 Graduate Communication: Research and Teaching

APPROVAL SIGNATURES:

Submitted by:  ________________________________ email: __________________

Department/Program:  ________________________________ Date: __________________

College Committee:  ________________________________ Date: __________________

Graduate Council Representative:  ________________________________ Date: __________________
Approval from other units:

Please list those units outside of your own who may be affected by this new, modified, or deleted course. Each of these units must approve this change prior to its being submitted to the Graduate Council for approval.

<table>
<thead>
<tr>
<th>Unit:</th>
<th>Head of Unit’s Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Graduate Council approval: ________________________________ Date: __________

Graduate Council representative: ____________________________ Date: __________

Provost Office representative: ______________________________ Date: __________