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:  ___X__ NEW  ____ MODIFY  ____ DELETE

Local Unit: CSS  Graduate Council Approval Date:

Course Abbreviation: CSS  Number: 739

Full Course Title: TOPICS IN COMPUTATIONAL SOCIAL SCIENCE

Abbreviated Course Title (24 characters max.): TOPICS COMP SOC SCI

Credit hours:  3:3:0  Program of Record: CSS

Repeatable for Credit?  ___X___ D=Yes, not within same term  Up to 3 hours
                      ___T=Yes, within the same term  Up to  ___ hours
                      ___N=Cannot be repeated for credit

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

Catalog Credit Format  3:3:0  Course Level: GF(500-600) ___ GA(700+) ___

Maximum Enrollment: 20  For NEW courses, first term to be offered: Fall 2004
Prerequisites: Permission of instructor

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses: Selected topics in computational social science not covered in fixed-content computational social science courses. May be repeated for credit as needed.

For MODIFIED or DELETED courses as appropriate:
Last term offered:  Previous Course Abbreviation:  Previous number:

Description of modification:

APPROVAL SIGNATURES:
Submitted by:  ___Prof. Claudio Cioffi-Revilla_ email: ccioffi@gmu.edu

Department/Program:  ___Center for Social Complexity_ Date: ____2/3/2004____

College Committee:  _______________________ Date: __________________________

Graduate Council Representative: ______________________ Date: __________________________