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: 998

Full Course Title: DOCTORAL DISSERTATION PROPOSAL

Abbreviated Course Title (24 characters max.): PHD PROPOSAL

Credit hours:  1-12:0:0  Program of Record: CSS

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

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

Catalog Credit Format  1-12:0:0  Course Level: GF(500-600)  ____ GA(700+)  _X_

Maximum Enrollment: 20  For NEW courses, first term to be offered: Fall 2006+
Prerequisites:  Permission of advisor

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses: Covers development of a research proposal, which forms the basis for a doctoral dissertation, under the guidance of a dissertation director and the doctoral committee. May be repeated as needed; however, no more than 12 credits of CSS 998 may be applied towards satisfying the doctoral degree requirements.

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: __________________