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  ____ MODIFY  ____ DELETE

Local Unit:  College of Education and Human Development
Graduate Council Approval Date:  

Course Abbreviation:  EDCD  Course Number:  617

Full Course Title: Counseling in International Schools

Abbreviated Course Title (24 characters max.):

Credit hours: 3  Program of Record: ISC

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

Grade Type:

GR: graduate grading, normal (A, A-, B+, B, C, F, IN, AB)

Activity Code (please indicate):

X_ Lecture (LEC)  ___ Lab (LAB)  ___ Recitation (RCT)
___ Studio (STU)  ___ Internship (INT)  ___ Independent Study (IND)

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

Maximum Enrollment: 25  For NEW courses, first term to be offered:

Prerequisites or co-requisites:  NA

Catalog Description (35 words or less):  Introduces counseling skills that are applicable to international school settings. Students will study, discuss, and develop basic counseling skills including building trust, empathy, questioning, listening, confronting, responding, interviewing, etc.

For MODIFIED or DELETED courses as appropriate:

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

Description of modification:  Change Grade Type to Special GT grading including “IP”

APPROVAL SIGNATURES:

Submitted by:  Lynn Walker Levy  email:  lwalker3

Department/Program:  Lynn Walker Levy  Date:  2/9/05

College Committee:  Joan Isenberg  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>CEHD</td>
<td>________________________</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fred Bemak/Program Coordinator</td>
<td></td>
</tr>
<tr>
<td>Unit:</td>
<td>Head of Unit’s Signature:</td>
<td>Date:</td>
</tr>
<tr>
<td>Unit:</td>
<td>Head of Unit’s Signature:</td>
<td>Date:</td>
</tr>
<tr>
<td>Unit:</td>
<td>Head of Unit’s Signature:</td>
<td>Date:</td>
</tr>
<tr>
<td>Unit:</td>
<td>Head of Units Signature:</td>
<td>Date:</td>
</tr>
</tbody>
</table>

Graduate Council approval: ________________________ Date: ____________
Graduate Council representative: ________________________ Date: ____________
Provost Office representative: ________________________ Date: ____________