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

Course Abbreviation: EDCI  Course Number: 521

Full Course Title: Curriculum Development for Language Learners

Abbreviated Course Title (24 characters max.):

Credit hours: 3  Program of Record: CRIN/CISL/CIMM

Repeatable for Credit?  ___ 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

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)  ___X__ GA(700+)

Maximum Enrollment: 25  For NEW courses, first term to be offered:
Prerequisites or co-requisites: EDCI 516, EDCI 519

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses.: Examines innovative approaches to assessing language minority students and English language learners. Topics include identification, placement, monitoring of student progress, development of authentic performance-based measures, design of portfolios.

For MODIFIED or DELETED courses as appropriate:
Last term offered: 04F  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:  2/8/05

College Committee:  _____ Joan Isenberg  Date:  2/23/05

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.

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<tr>
<td>Center for Language and Culture</td>
<td>Lorraine Valdez Pierce/ESL Coordinator</td>
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Graduate Council approval: __________________________________________ Date: ____________

Graduate Council representative: __________________________________ Date: ____________

Provost Office representative: ______________________________ Date: ____________