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:  SCS  Graduate Council Approval Date:

Course Designation:  EOS  Course Number:  796

Full Course Title:  Directed Reading and Research

Abbreviated Course Title (24 characters max.):  Directed Reading

Credit hours:  1-6  Program of Record:  EOS Ph.D.

Repeatable for Credit?  ___ D=Yes, not within same term  Up to hours
  __ X_T=Yes, within the same term  Up to 6 hours
  ____ N=Cannot be repeated for credit

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

Catalog Credit Format:  1-6:0:0  Course Level:  GF(500-600)  ____ GA(700+)  __X__

Maximum Enrollment:  25  For NEW courses, first term to be offered:  Fall 2005

Prerequisites:  Permission of instructor.

Catalog Description (35 words or less):  Reading and research on a specific topic in earth systems and geoinformation sciences under the direction of a faculty member. May be repeated as necessary.

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

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.

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Graduate Council approval: ________________________________ Date: ____________
Graduate Council representative: _________________________ Date: ____________
Provost Office representative: __________________________ Date: ____________