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: ISE   Graduate Council Approval Date: 

Course Abbreviation: ISA   Course Number: 799

Full Course Title: Master Thesis

Abbreviated Course Title (24 characters max.): Master Thesis

Credit hours: 3   Program of Record: MS Information Security and Assurance

Repeatable for Credit? ___*___ N=Cannot be repeated for credit

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

Catalog Credit Format 6:3:0   Course Level: GF(500-600) ___ GA(700+) ___

Maximum Enrollment: N/A   For NEW courses, first term to be offered: FALL 2004

Prerequisites: 18 hours of credit applicable towards M.S.; or permission of advisor

Catalog Description (35 words or less)

ISA 799 Master Thesis (6:3:0) Prerequisites: 18 hours of credit applicable towards M.S. or permission of instructor. Original or expository work chosen and completed under the supervision of a graduate faculty member, which results in a technical report accepted by a three-member faculty committee. The report must be defended in an oral presentation. (In order to register, the student must complete an independent study form, which is available in the department office. The form must be initialed by the faculty sponsor and approved by the department chairman.)

For MODIFIED or DELETED courses as appropriate:

Last term offered:   Previous Course Abbreviation:   Previous number:

APPROVAL SIGNATURES:

Submitted by: Francesco Parisi-Presicce   email: fparisip@gmu.edu

Department/Program: ISE/ MS Info. Security and Assurance   Date: October 29, 2003

College Committee: ___________________________________________ Date: __________________

Graduate Council Representative: ______________________________ Date: __________________
GEORGE MASON UNIVERSITY  
Course Coordination Form

**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: ____________