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:  Arts Management  Graduate Council Approval Date:

Course Abbreviation:  MAM  Course Number:  599

Full Course Title:  Special Topics in Arts Management

Abbreviated Course Title (24 characters max.):  Special Topics

Credit hours:  1—6  Program of Record:  Arts Management

Repeatable for Credit?  ___ D=Yes, not within same term  Up to hours
  __x__ T=Yes, within the same term  Up to 12 hours
  ___ N=Cannot be repeated for credit

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

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

Maximum Enrollment:  20  For NEW courses, first term to be offered:
  Spring 2005
Prerequisites or corequisites:  Admission to the MAM graduate program or permission of instructor

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses:
MAM 599 Special Topics in Arts Management:  (1-6:1-6:0)
Prerequisite:  Admission to the MAM graduate program or permission of instructor.
This course provides students the opportunity to explore special and timely topics in the field of arts management including both theoretical and applied areas. Topics and credit will vary. May be repeated for up to 12 credits taken under different topics.
For MODIFIED or DELETED courses as appropriate:
Last term offered: Previous Course Abbreviation: Previous number:

Description of modification:

APPROVAL SIGNATURES:
Submitted by: Dr. Meg Brindle__________________ email: mbrindle@gmu.edu_

Department/Program:__________________________ Date:__________________

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: __________