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:  Psychology
Graduate Council Approval Date:

Course Abbreviation: PSYC
Course Number: 621

Full Course Title: Empirical bases of Applied Behavior Analysis

Abbreviated Course Title (24 characters max.): Empirical bases of ABA

Credit hours: 3
Program of Record:

Repeatable for Credit?  ___ D=Yes, not within same term    Up to hours ___ T=Yes, within the same term    Up to hours  ___ N_ 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  3:3:0  Course Level:  GF(500-600)  __X__ GA(700+)

Maximum Enrollment: 15  For NEW courses, first term to be offered: Fall 2005
Prerequisites or corequisites:  None

Catalog Description (35 words or less) Please use catalog format and attach a copy of the syllabus for new courses. This course focuses on the basic content of applied behavior analysis and teaches course participants to implement behavioral procedures and to develop behavioral programs for clients with fundamental behavioral needs.

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

Description of modification:

APPROVAL SIGNATURES:
Submitted by:  Jerome Short, Associate Chair for Graduate Studies in Psychology  Email: jshort@gmu.edu

Department/Program:  ________________________________  Date:  __________________

College Committee:  ________________________________  Date:  __________________

Graduate Council Representative:  ________________________________  Date:  __________________