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: SPP
Graduate Council Approval Date:

Course Abbreviation: PUBP
Course Number: 711

Full Course Title: Modeling Policy in Dynamic Environments

Abbreviated Course Title (24 characters max.): Modeling Plcy/Dyn Envrts

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 __X_ N=Cannot be repeated for credit

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

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

Maximum Enrollment: 20
For NEW courses, first term to be offered:

Prerequisites or corequisites:

Catalog Description (35 words or less) Please use catalog format and attach a copy of the syllabus for new courses.:

Introduces the basics of policy making and decision analysis with a major focus on the hands-on development and use of systems dynamics-based models.

For MODIFIED or DELETED courses as appropriate:

Last term offered: 200510
Previous Course Abbreviation:PUBP
Previous number:711

Description of modification: Course title and description change

APPROVAL SIGNATURES:
Submitted by: ________________________________ email: ________________
Department/Program: ________________________________ Date: ________________
College Committee: ________________________________ 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: ____________