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: School of Public Policy
Graduate Council Approval Date: 

Course Abbreviation: PUBP  
Course Number: 840

Full Course Title: U.S. Policy-Making Institutions

Abbreviated Course Title (24 characters max.): US Policy Making Instits

Credit hours: 4  
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  4:3:0  
Course Level: GF(500-600)  ___  GA(700+)  _X_

Maximum Enrollment: 15  
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:
Examination of major institutions that formulate and implement policy at the national level in the U.S. Emphasis on the Presidency, Congress, and executive branch bureaucracies. Also considered are agenda building institutions such as various media, interest groups, political parties, and elections.

For MODIFIED or DELETED courses as appropriate:
Last term offered: Fall 2004  Previous Course Abbreviation: PUBP  Previous number: 840

Description of modification: change to course title, description

APPROVAL SIGNATURES:
Submitted by: ________________________________ email: __________________
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: __________