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: 860

Full Course Title: Social Theory, Culture, and Public Policy

Abbreviated Course Title (24 characters max.): Soc Thry, Culture & Plcy

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
                                 ____ 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.: Major social and cultural theories that underlie public policies. Selections from classical and contemporary social theorists relevant to the study of social change, social capital, and social organization. Focus on the interplay among culture, social institutions, social processes and policy.

For MODIFIED or DELETED courses as appropriate:

Last term offered: Fall 2004  Previous Course Abbreviation: PUBP  Previous number: 860

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: __________