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:  Social Work  
Graduate Council Approval Date: 

Course Abbreviation:  SOCW  
Course Number:  623  

Full Course Title:  Human Behavior and Social Systems I  

Abbreviated Course Title (24 characters max.): Hum Bhv & Soc Sys I  

Credit hours: 3  
Program of Record:  MSW  

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)  ___ Seminar (SEM)

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

Maximum Enrollment:  25  

For NEW courses, first term to be offered:

Prerequisites or corequisites:
Prerequisite: Graduate standing.

Catalog Description (35 words or less)  Please use catalog format and attach a copy of the syllabus for new courses. 
Ecological approach to the behavior of individuals, families, groups, organizations, and communities. Integrates and applies theories from psychology, sociology, biology, and anthropology to the study of infants, children, and adolescents. Emphasizes human diversity.

For MODIFIED or DELETED courses as appropriate:
Last term offered:  FA03  
Previous Course Abbreviation:  
Previous number:

Description of modification: (1) changes course description in order to rearrange which material is covered in first part of sequence in order to better integrate micro and macro content.

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: ____________