Course Approval Form

For approval of new courses and deletions or modifications to an existing course.
registrar.gmu.edu/facultystaff/curriculum

Action Requested:
- Create new course
- Delete existing course
- Modify existing course (check all that apply)

<table>
<thead>
<tr>
<th>Title</th>
<th>Prereq/coreq</th>
<th>Repeat Status</th>
<th>Grade Type</th>
</tr>
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Course Level:
- Undergraduate
- Graduate

College/School: VS-IT&E
Submitted by: 

Department: SEOR
Ext: 
Email: 

Subject Code: SYST
Number: 696
(Do not list multiple codes or numbers. Each course proposal must have a separate form.)

Effective Term: Fall
Year: 2010

Title:
Current
Banner (30 characters max including spaces)
New

Credits: (check one)
- Fixed
- Variable
- or
- to

Repeat Status: (check one)
- Not Repeatable (NR)
- Repeatable within degree (RD)
- Repeatable within term (RT)
- Maximum credits allowed:

Grade Mode: (check one)
- Regular (A, B, C, etc.)
- Satisfactory/No Credit
- Special (A, B C, etc. +IP)

Schedule Type Code(s): (check all that apply)
- Lecture (LEC)
- Lab (LAB)
- Recitation (RCT)
- Internship (INT)
- Independent Study (IND)
- Seminar (SEM)
- Studio (STU)

Prerequisite(s):

Corequisite(s):

Instructional Mode:
- 100% face-to-face
- Hybrid: ≤ 50% electronically delivered
- 100% electronically delivered

Special Instructions: (list restrictions for major, college, or degree; hard-coding; etc.)

Are there equivalent course(s)?
- Yes
- No

If yes, please list

Catalog Copy for NEW Courses Only (Consult University Catalog for models)

<table>
<thead>
<tr>
<th>Description</th>
<th>Notes</th>
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<td>(No more than 60 words, use verb phrases and present tense)</td>
<td>(List additional information for the course)</td>
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Indicate number of contact hours:

When Offered: (check all that apply)
- Fall
- Summer
- Spring

Hours of Lecture or Seminar per week:

Hours of Lab or Studio:

Approval Signatures

Department Approval
Date

College/School Approval
Date

If this course includes subject matter currently dealt with by any other units, the originating department must circulate this proposal for review by those units and obtain the necessary signatures prior to submission. Failure to do so will delay action on this proposal.

Unit Name
Unit Approval Name
Unit Approver’s Signature
Date

For Graduate Courses Only

Graduate Council Member
Provost Office
Graduate Council Approval Date

For Registrar Office’s Use Only: Banner ________________________ Catalog ________________________ revised 2/2/10