

# 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 ☐ Inactivate existing course

☒ Modify existing course (check all that apply)

☐ Title ☐ Credits ☐ Repeat Status ☐ Grade Type

☒ Prereq/coreq ☐ Schedule Type ☐ Restrictions

☐ Other: \_\_\_\_\_

## Course Level:

☒ Undergraduate

☐ Graduate

College/School: COS Department: CHEMISTRY & BIOCHEMISTRY

Submitted by: Paul Cooper Ext: 3-2403 Email: pcooper6@gmu.edu

Subject Code: CHEM Number: 332 Effective Term: ☒ Fall ☐ Spring ☐ Summer Year 2013

(Do not list multiple codes or numbers. Each course proposal must have a separate form.)

Title: Current PHYSICAL CHEMISTRY-II

Banner (30 characters max including spaces) \_\_\_\_\_

New \_\_\_\_\_

Credits: (check one) ☒ Fixed 3 or ☐ Variable 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: (check one) ☒ Lecture (LEC) ☐ Lab (LAB) ☐ Recitation (RCT) ☐ Internship (INT)

☐ Independent Study (IND) ☐ Seminar (SEM) ☐ Studio (STU)

Prerequisite(s): CHEM 211, CHEM 212, CHEM 313, CHEM 314, CHEM 315, CHEM 318, CHEM 321, CHEM 331, MATH 113, MATH 114, PHYS 243 or PHYS 160

Corequisite(s): \_\_\_\_\_

Instructional Mode:

☒ 100% face-to-face

☐ Hybrid: ≤ 50% electronically delivered

☐ 100% electronically delivered

Restrictions Enforced by System: Major, College, Degree, Program, etc. Include Code.

"C" grade or better in CHEM 211, CHEM 212, CHEM 313, CHEM 314, CHEM 315, CHEM 318, CHEM 321, CHEM 331, MATH 113, MATH 114, PHYS 243 or PHYS 160.

Are there equivalent course(s)?

☐ Yes ☒ No

If yes, please list \_\_\_\_\_

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

| Description (No more than 60 words, use verb phrases and present tense) | Notes (List additional information for the course) |
|-------------------------------------------------------------------------|----------------------------------------------------|
|                                                                         |                                                    |

Indicate number of contact hours: \_\_\_\_\_ Hours of Lecture or Seminar per week: \_\_\_\_\_ Hours of Lab or Studio: \_\_\_\_\_

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

## Approval Signatures

[Signature] 4.16.13 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 \_\_\_\_\_