

## **Program Approval Form**

For approval of new programs and deletions or modifications to an existing program.

| X Concentration (Choone):  Degree Requirement  | at apply) val required except for minors) pose X Add Delete | Modify         | Type (Check one):  B.A. X B.S. Minor  Master's Ph.D. Undergraduate Certificate*  Graduate Certificate*  Bachelor's/Accelerated Master's  Other: |
|--|---|----------------|---|
| College/School: Universi   | ty Provost  | Department:    | INTO Mason  |
| Submitted by: Christing  |   | Ext: 3-5139    | Email: cbrady12@gmu.edu   |
| Effective Term: Fall 2017 Please note: For students to be admitted to a new degree, minor, certificate or concentration, the program must be fully approved, entered into Banner, and published in the University Catalog.   |   |                |   |
| Justification: (attach separate document if necessary)   |   |                |   |
| Adding a concentration for each type of pathway offered by INTO Mason for the Cyber Security Engineering (CYSE) Program. (Transfer/Accelerated = 1 semester, Standard = 2 semesters, Comprehensive = 3 semesters, Extension = additional terms beyond the original program length).        |   |                |   |
|  | Existin   | п              | New/Modified  |
| Program Title: (Required) Title must identify subject matter. Do not include name of college/school/dept.  | Engineering & Computing P\                                  | W (IN-BS-P005) | Newmodified   |
| Concentration(s):  |   |                | Cyber Security Engineering (CYSE-TPP Transfer) (CYSE-STD Standard) (CYSE-CMP Comprehensive) (CYSE-EXT Extension)                                |
| Admissions Standards / Applicat<br>Requirements: (Required only if different<br>from those listed in the University Catalog)   |   |                | (CISE-EXI EXIGISION)  |
| Degree Requirements:<br>Consult University Catalog for models, attach<br>separate document if necessary using track<br>changes for modifications   |   |                |   |
| Courses offered via distance: (if applicable)  |   |                |   |
| TOTAL CREDITS REQUIRED:  |   |                |   |
| *For Certificates Only: Indicate whether students are able to pursue on a Full-time basis Part-time basis  |   |                |   |
| Approval Signatures  |   |                |   |
| North Valley   | 9/25/17 Janette K.  | Muir 9/25/     | 17  |
| Department Date College/School Date  |   |                |   |
| If this program may impact another unit or is in collaboration with another unit at Mason, 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 Sig                      |                |   |
| VSE  | Sharon Caraballo  | Stalls         | 9/25/17   |
| For Undergraduate Programs only  |   |                |   |
| Undergraduate Council Member   | Provost Office  |                | Undergraduate Council Approval Date   |