

Program Approval Form

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

Concentra	ck <u>ALL</u> that apply					Type (Check one): B,A. X B.S. Minor Master's Ph.D. Undergraduate Certificate*			
x one):	tion (oncose	X Add	Delete	Modify	Graduate Certifi	· · · · · · · · · · · · · · · · · · ·			
Degree Re	quirements				Bachelor's/Acce	lerated Other:			
	Standards/ Appl	lication Requirements	6	22					
X Other Changes:									
	<u></u>								
College/School:	University Prov			Department:	INTO Mason				
Submitted by:	Christina Brady	/		Ext : 3-5139	Email:	cbrady12@gmu.edu			
Effective Term: Fall 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 separ	rate document if	necessary)							
Adding a concentration for e = 2 semesters, Comprehens	each type of path	way offered by INTO N	Mason for th	e Kinesiology (KNE	ES) Program. (Transfer//	Accelerated = 1 semester, Standard			
- 2 semesters, comprehens	sive - o semeste	rs, Extension - additio	TILLI TOTTIO D	eyona the original p		· ·			
Program Title: (Required) Title must identify subject matter. Do not include		Existing			New/Modified				
		Human & Social Development UGPW (IN-BS-P003)							
name of college/school/dept. Concentration(s):					Kinesiology				
					(KNES-TPP Transfer) (KNES-STD Standard)				
					(KNES-ACC Accelerated)				
					(KNES-CMP Comprehensive) (KNES-EXT Extension)				
Admissions Standards / Application Requirements: (Required only if different from those listed in the University Catalog)			-		(TITES EXT EXCHOISIN				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o ununog/								
Degree Requirements: Consult University Catalog for models, attach separate document if necessary using track changes for modifications				12					
Courses offered via distance: (if applicable)									
TOTAL CREDITS REQUIRED:			27						
*For Certificates Only: Indicate whether students are able to pursue on a Full-time basis Part-time basis									
Approval Sign	atures								
Lat IV I I		Janos	tte K. 1	Muir 9/25/1	17				
Department 178/13	9/2 Dat			Date					
Department	Da	te College,	001001	Date	,				
						artment must circulate this ay action on this proposal.			
Unit Name	Ur	nit Approval Name		Unit Approver's Si	mature	Date			
College of Education		r. Ellen Roda	ers	سعالک	Lague	9/28/17			
Human Develo					U	U			
For Undergraduate Programs only									
Undergraduate Council Mem	nber	Provo	st Office	-	Unde	rgraduate Council Approval Date			

For Graduate Programs Only

Graduate Council Member	Provost Office	+	Graduate Council Approval Date
For Registrar Office's Use Only: Received	Banner	Catalog	revised 9/2/2016