If you wish to submit a new course, please login

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				G		STUDIES	
,	The University Of Toledo		evel (check one)* Will this course impact pro				
	The University Of Toledo	Undergraduate requirements? Yes a Program Modification					
	NEW COURSE PROPOSAL	Graduate				pleted.	
		Type of course (check		C			
•	* denotes required fields	Academic Skills I			g Intensive (WAC	•	
1.	College*:	Univ. Core: O					
	Select a College MEDICINE			•	ture () Non-US		
	Department*:					ci & Phys 🔾 Soc Sci	
	Select a Department PROGRAM	(to be considered as co	re curriculum, q	uestion 18 m	ust be completed)		
2.	Contact Person*: Robert Blumenthal, PhD	Phone: 419-383-5422 (XXX-XXXX) Email: robert.blumenthal@utoledo.edu					
3.	Alpha/Numeric Code (Subject area - number)*:	·					
	If this is a renumbering, please request an electronic capproval through the Register's Office at x4865, and a	opy of the old course ttach it to #15 in this	Administrativ	e Use Only			
4	form. Remember to delete the old course ID in #13.		Code:				
4.	Proposed title*: Thesis in Bioinformatics	÷					
	Proposed effective term: Fall 2012		Approved (se	nate or Grad	Council)		
5.	Planned enrollment per section; per ter	m: 5	Effective Date	»:	//	(mm/dd/yyyy)	
6.	Is the course cross-listed with another academic unit?	Yes (a) No CIP Code:					
	is the course offered at more than one level? \bigcirc Yes		Sub:	Prog:	L	evel:	
	If yes to either question, please list additional Alpha/N submit a separate New Course form or Course Modific course(s) referenced below.		L				
	a, BIPG - 999699 PAR _b , 01/25	5/12 per Bob	Blument	hal .			
	Approval of other academic unit (signature)						
	Name and title						
	If course is to be offered at more than one level, attach requirements are the same for each level, justification is	an explanation of the danust be provided.	ifferent requiren	ents that stud	lents must meet f	or each level. If the	
7.	Credit hours*: Fixed:	or Variable:	1	to 15	i		
8.	Delivery Mode: Primary*	Secondary	Terti	ary			
	a. Activity Type * Independent Stud		<i>5</i>	* * * * * * * * * * * * * * * * * * *	†Choices are: I	Lecture, Recitation, ar Lab, Open Lab,	
	b. Minimum Credit Hours w 1		*		Studio, Clinic,	Field, Independent	
	Maximum Credit Hours # 15				Study, Worksho Assisted Instruc		
	c. Weekly Contact Hours * 1-10	•			<u></u>		
9.	Terms offered:	nmer					
	Years offered: © Every Year Alterna	te Years					
10.	Are students permitted to register for more than one sec	etion during a term?	No 🔘 Yes				
	May the courses be repeated for credit? O No 9 Yo			aximum Hou	rs		
	may me composite to repeated for crediting the Co. 1.			•			

H. Grading System*:	Undergraduate	e			Graduate				
	O Normal C	Grading (A-F,P	S/NC.PR, I)		Normal Grading	(A-F,PS/NC.PR, I)			
	Passing C	3rade/No Cred	it (A-C, NC)		O Grade Only (A-1	· 3)			
	Credit/No Credit				Satisfactory/Unsatisfactory (G only)				
	Grade On	ıly (A-F, PR, I)		O Audit only				
	Audit onl	у			O No Grade				
	No Grade	3							
12. Prerequisites (must b	e taken before):	a.		b.	•	с.	-		
		PIN (Per	misson From Ins	tructor)	O PDP (Permissi	on From Department)	Reset		
Co-requisites (must b	oe taken together)	: a.	#	b.		. c.			
13. If course is to replace	e an existing, cour	se(s) will be de	eleted, and when	should that c	leletion occur?				
	moved from inven	tory	Final Term to	be offered	(YYYYT, i,e, use	20064 for Fall'06)			
a.	-								
b.	-				•				
C.	- 1								
d.	-								
14. Catalog description* ((30 words Maxim	ium)							
See attache	d				• •		1.4		
	and the language of manifest of constitution of contrast of contra	and the second of the second contract of the				- *************************************			
15. Attach an electronic c	copy of a complete	outline of the	major topics cov	ered.					
Syllabus: *	, .						Browse		
Additional Attachmen	nt 1:		and the second of the second the second of t			<u>B</u>	rowse		
Additional Attachmen	nt 2:					В	rowse		
Where does this course demand.	e fit in the Univer	sity/College/D	epartment curricu	ılum? (Be sp	ecific by course level	, if applicable). Indicate	e prospective		
See (17)	The Filter I Stage State State State 45 a					Table 1 American State			
							r - -		
							12.0		
17. If the proposed course duplication. (If this coupled to the endorsement from that	urse duplicates ma	iterial covered	in another course	within you	department or colleg	nce and provide a ration e or in another college, r in which this course w	attach a letter of		
This is simply to harm						specific thesis research	_, _,,		
an INDI course.									
							1		
18. If the course is intende template:		•					abus using the		
Please explain how this	s course fulfills the	e general educ	ation guidelines.	(Guidelines	are available in <u>Facul</u>	ty Senate Website)	· · · · · · · · · · · · · · ·		
N/A	•						Agi e		
						•	•		
Course Approval:									

Faculty Senate Undergrad. Curriculum Comm.;		Date	Month / / Day / Year
Faculty Senate Core Curriculum Comm.:		Date	Month / Day / Year
Graduate Council:	BILL AND	Date	Month / Day / YOOO
Office of the Provost:		Date	Month / Day / Year
Registrar's Office:		Date	Month / Day / Year

You will see a confirmation page after you press the "Submit" button. If you do not see the confirmation page, please call x 4320 or send an email to ProvostWebMaster.utoledo.edu. Thanks.

Submit New Coming Proposal

BIPG999 Thesis in Bioinformatics

Research in bioinformatics, or interdisciplinary investigation of biomedical problems with significant bioinformatic components. This research is at the masters level, leading to completion of a scientific project for presentation as a thesis. May be repeated for credit.