

# The University of Texas Graduate School of Biomedical Sciences at Houston

## Request for Approval of a *Special Project: Course (GS000610)*

### Part I: To be completed by student:

Name of student (type or print)

Semester/Year

Degree program:  Ph.D.     M.S. only     Non-Degree

### Part II: To be completed by Faculty Sponsor:

Course title

Instructor or course coordinator (name)

Telephone number

Department/division, institution

### Course description:

For courses listed in the UT Medical School *Catalog* (but not listed in the GSBS *Catalog*) give the Medical School course number:

For all other special courses, describe the course content and objectives:

**Course hours:** Total number of weeks:                  lecture hours/week:                  lab hours/week:

**Grading:**    The grade, either  letter grade or  pass/fail, will be determined by:  midterm exam;  
 final exam;  written report;  oral report;  other.

\_\_\_\_\_  
Approved, Faculty Sponsor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved, Faculty Sponsor's Department Chairman

\_\_\_\_\_  
Date

### Part III: To be completed by Dean's Office:

Title for enrollment card / transcript: S P C :

\_\_\_\_\_  
Approved credit hours

\_\_\_\_\_  
Signature of Dean of Academic Affairs

\_\_\_\_\_  
Date