NOTE to STUDENTS: If you need any accommodations related to attending/enrolling in this course, please contact one of the Graduate School's 504 Coordinators, Cheryl Spitzenberger or Natalie Sirisaengtaksin. We ask that you notify GSBS in advance (preferably at least 3 days before the start of the semester) so we can make appropriate arrangements.

Term and Year: **Course Number and Course Title:** **Credit Hour:** **Meeting Location:** **Building/Room#:** **WebEx/Zoom Link:**	**Program Required Course:**　　Yes　　No **Approval Code:**　　Yes　　No **(If yes,** the Course Director or the Course Designee will provide the approval code.) **Audit Permitted:**　　Yes　　No **Classes Begin:** **Classes End:** **Final Exam Week:**

Class Meeting Schedule

Day	Time

Course Director Name and Degree: Title: Department: Institution:　　*UTH*　　*MDACC* Email Address: Contact Number: **Course Co-Director/s:** (if any) Name and Degree: Title: Department: Institution:　　*UTH*　　*MDACC* Email Address: Contact Number: **NOTE:** Office hours are available by request. Please email me to arrange a time to meet.	**Instructor/s** (Use additional page as needed) 1. 　Name and Degree 　Institution: 　Email Address : 2. 　Name and Degree 　Institution: 　Email Address : 3. 　Name and Degree 　Institution: 　Email Address 4. 　Name and Degree 　Institution: 　Email Address:

Teaching Assistant: (if any)	**Cont. Instructor/s**
Name and Email Address	5.
	Name and Degree
Name and Email Address	Institution:
	6. Bin Liu -

Course description:

Textbook/Supplemental Reading Materials (if any)

-
-
-
-

Course Objective/s:
Upon successful completion of this course, students will

*Specific Learning Objectives***:**

1.

2.

3.

4.

5.

Student responsibilities and expectations:

Grading System:	Letter Grade (A-F)	Pass/Fail

Student Assessment and Grading Criteria : (May include the following:)

Homework (%)	Description
Quiz (%)	Description
Presentation (%)	Description
Midterm Exams (%)	Description
Final Exam (%)	Description
Workshop or Breakout-Session (%)	Description
Participation and/or Attendance (%)	Description

CLASS SCHEDULE

Day/Date	Duration (Hour taught by lecturer)	Lecture Topic	Lecturer/s

NOTE: Provide other class information as needed.

/jal-kf