

**IMPORTANT:** This syllabus form should be submitted to OAA ([gsbs\\_academic\\_affairs@uth.tmc.edu](mailto:gsbs_academic_affairs@uth.tmc.edu)) a week before the start of each semester.

**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 Spitzengerger 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.

<p><b>Term and Year:</b></p> <p><b>Course Number and Course Title:</b> :Biostatistics for Life Scientists</p> <p><b>Credit Hours:</b></p> <p><b>Meeting Location:</b></p> <p><b>Building/Room#:</b></p> <p><b>WebEx/Zoom Link:</b></p>	<p><b>Program Required Course:</b>    Yes    No</p> <p><b>Approval Code:</b>    Yes    No</p> <p>(If yes, the Course Director or the Course Designee will provide the approval code.)</p> <p><b>Audit Permitted:</b>    Yes    No</p> <p><b>Classes Begin:</b></p> <p><b>Classes End:</b></p> <p><b>Final Exam Week:</b></p>
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**Class Meeting Schedule**

Day	Time

<p><b>Course Director</b> Name and Degree: Title: Department: Institution:    <i>UTH</i>    <i>MDACC</i> Email Address: Contact Number:</p> <p><b>Course Co-Director/s:</b> (if any) Name and Degree: Title: Department: Institution:    <i>UTH</i>    <i>MDACC</i> Email Address: Contact Number:</p> <p><b>Office Hours:</b></p>	<p><b>Instructor/s</b></p> <p>1. Name and Degree: Institution: Email Address :</p> <p>2. Name and Degree: Institution: Email Address :</p> <p>3. Name and Degree: Yin liu, Ph.D Institution: UTHealth Email Address: Yi.Liu.@uth.tmc.edu</p>
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**Teaching Assistant:** (if any)

**N/A**

Name and Email Address

Name and Email Address

**Course description:**

**Textbook/Supplemental Reading Materials** (if any)

- N/A

**Course Objective/s:**

Upon successful completion of this course, students will ...

***Specific Learning Objectives:***

1.

2.

3.

4.

5.

**Student responsibilities and expectations:**



