**Request—New Elective course for MS3 and MS4 Students**

Please answer the following questions. Use additional space if needed.

|  |  |
| --- | --- |
| Title |  |
| Course Director(s) |  |
| Department |  |
| Description |  |
| Learning Objectives |  |
| Rationale/Need |  |
| Educational Methods |  |
| Activities/Schedule | [append a sample schedule if appropriate] |
| Assessment and Evaluation |  |
| Requirements for Successful Completion |  |
| Course Type | Acting Internship/Elective/Integrated Life Science  [select one] |
| Course Attributes | Clinical/Humanities/No-Prequisites/Online-Remote/Research  [select all that apply] |
| Grading Scale | Satisfactory/Unsatisfactory  Or  Honors/High Satisfactory/Satisfactory/Low Satisfactory/Unsatisfactory |
| Extramural (away) | YES/NO |
| Available to Add/Drop | YES/NO |
| Permission to Add/Drop | Is special permission required to add/drop this course 4 weeks in advance?  YES/NO |
| Location for Course |  |
| Preceptors/Faculty Associated with this Course |  |
| Periods Available | 1-12.5 |
| Maximum # of Students Per Period |  |
| Prerequisites |  |
| Visiting Students | YES/NO |
| International Students | YES/NO |
| Call required | YES/NO |
| Student contact hours per week |  |
| Course Contact | [name/contact information] |
| Student Coordinator | [if different from above] |
| Reporting Place |  |
| Available to lottery? | YES/NO |