

## **Certificate Change Transmittal Form**

Department Name and Number					CIP Code		
Certificate Identification  Certification Name							
Effective Term and Year		Terminate Cert	ficate	Other Ch	nanges (specify below )		
Change Certificate Identification to  Certification Name  Certification Name for Transcript (please limit to 35 characters)							
Credit Hours: From To							
Prerequisites							
From			То				
Certificate Requirements							
From			То				
Rationale /Place in Curriculum/Impact on Program							
Department Contact	Name Phone		Emai	il			
College Contact	Name Phone		Emai	il			

ADDENDUM Certificate Change Transmittal Form Certificate in Translational Health Science Medicine 31290100 CIP 51.1401 Effective Spring 2013

## Change Certificate Requirements To

Course	Title	Credits	Grading scheme	
number				
GMS 6903	Manuscript and Abstract Writing for Clinician/Scientists	2	Letter	
GMS 6xxx	Introduction to NIH Grant Writing for Biomedical	1	S/U	
(Pending at	Sciences			
SCNS				
Approval as				
of 10/16/12)				
GMS 6190	Seminar	1 (max 12)	S/U	
GMS 6931	Ethical and Policy Issues in Clinical Research	2	Letter	
GMS 7093	Introduction to Clinical and Translational Research	2	Letter	
Minimum 3 credits of research design & analysis, chosen from the following:				
GMS 6822	Measuring and Analyzing Health Outcomes II	3	Letter	
GMS 6826	Advanced Design and Methodology for Case-Control	2	Letter	
	Studies in Clinical Research			
GMS 6829	Longitudinal Research Design	2	Letter	
GMS 6832	Economic Methods for Evaluating Value in Health	3	Letter	
GMS 6844	Experimental and Quasi-Experimental Research Designs	2	Letter	
	for Community Settings			
GMS 6821	Meta-Analysis in Clinical, Health Services Research and	2	Letter	
	Public Health			
PHC 6000	Epidemiology Methods I	3	Letter	
PHC 6011	Epidemiology Methods II	3	Letter	