

University of Missouri-Kansas City
GRADUATE CERTIFICATE IN CLINICAL RESEARCH
 PROGRAM OF STUDY

Students should complete this form in consultation with their faculty advisor before finishing 60% of required coursework. Please submit the completed, signed form to the Department of Biomedical and Health Informatics.

Full Name (printed): _____

Student ID Number: _____

Please list below courses proposed for your advanced degree program. Note: *Over and above the undergraduate prerequisites for graduate work in the special field, the student must present at least 15 credit hours from courses receiving graduate credit. At least 60% of the total number of hours applicable to the degree program must be at the 500 and 600 levels.*

Required Courses (15 credit hours)	Credit Hours	Semester	Grade	Notes (e.g. committee approvals for: transfer courses, substitution for required course, etc.)
MEDB 5501: Biostatistics I	3			
MEDB 5510: Clinical Research Methodology	3			
MEDB 5511: Principles & Applications of Epidemiology	3			
MEDB 5512: Clinical Trials	3			
MEDB 5513: Overview of Health Services Research	3			
Total Credit Hours (at least 15)				

Student Signature *Date*

Advisor Signature *Date*

Chair, Biomedical and Health Informatics Signature *Date*

Chair, SOM Graduate Council Signature *Date*