

**The Ohio State University
Colleges of the Arts and Sciences New Course Request**

Mathematics

Academic Unit

Mathematics

Book 3 Listing (e.g., Portuguese)

350 Introduction to Mathematical Biology

Number

Title

Intro to Math Biology

U

3

18-Character Title Abbreviation

Level

Credit Hours

Summer

Autumn

Winter

Spring X

Year

2010

Proposed effective date, choose one quarter and put an "X" after it; and fill in the year. See the OAA curriculum manual for deadlines.

A. Course Offerings Bulletin Information

Follow the instructions in the OAA curriculum manual. If this is a course with decimal subdivisions, then use one New Course Request form for the generic information that will apply to all subdivisions; and use separate forms for each new decimal subdivision, including on each form the information that is unique to that subdivision. If the course offered is less than a quarter or a term, please complete the Flexibly Scheduled/Off Campus/Workshop Request form.

Description (*not to exceed 25 words*):

Introduction to quantitative and qualitative analysis of several mathematical models for biological problems .

Quarter offered: Spring

Distribution of class time/contact hours: 3 classes

Quarter and contact/class time hours information should be omitted from Book 3 publication (yes or no): no

Prerequisite(s): Math 255 or Math 415 or permission of instructor

Exclusion or limiting clause: N/A

Repeatable to a maximum of 0 credit hours.

Cross-listed with: N/A

Grade Option (Please check): Letter S/U Progress What course is last in the series? _____

Honors Statement: Yes No

GEC: Yes No

Admission Conditions Course: Yes No

Off-Campus: Yes No

EM: Yes No

Honors Embedded Statement: Yes No

Service Learning Course: Yes No

Other General Course Information:

(e.g. "Taught in English." "Credit does not count toward BSBA degree.")

N/A

B. General Information

Subject Code _____ Subsidy Level (V, G, T, B, M, D, or P) _____

If you have questions, please email Jed Dickhaut at dickhaut.1@osu.edu.

1. Provide the rationale for proposing this course:

As part of the revision of the undergraduate mathematics major, a new bio-math track is being developed. This new course would be part of it.

2. Please list Majors/Minors affected by the creation of this new course. Attach revisions of all affected programs. This course is (check one): Required on major(s)/minor(s) A choice on major(s)/minors(s)

An elective within major(s)/minor(s) A general elective

3. Indicate the nature of the program adjustments, new funding, and/or withdrawals that make possible the implementation of this new course.
 No new funding is necessary. The course will be taught within the regular teaching duties of mathematics faculty.

4. Is the approval of this request contingent upon the approval of other course requests or curricular requests?

Yes No List: _____

5. If this course is part of a sequence, list the number of the other course(s) in the sequence: _____ N/A _____

6. Expected Section Size: _____ 15-20 _____ Proposed number of sections per year: _____ 1 _____

7. Do you want prerequisites enforced electronically? (see OAA manual for what can be enforced) Yes No

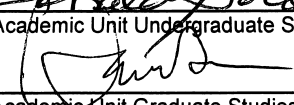
8. This course has been discussed with and has the concurrence of the following academic units needing this course or with academic units having directly related interests (*List units and attach letters and/or forms*): Not Applicable
 Biology

9. **Attach a course syllabus that includes a topical outline of the course, student learning outcomes and/or course objectives, off-campus field experience, methods of evaluation, and other items as stated in the OAA curriculum manual and e-mail to ascurofc@osu.edu.**

CONTACT PERSON: _____ Avner Friedman _____ E-MAIL: afriedman@math.ohio-state.edu _____ PHONE: _____ 2-5795 _____

Approval Process The signatures on the lines in ALL CAPS (e.g. ACADEMIC UNIT) are required.

	RONALD SOLOMON	11/7/08
1. Academic Unit Undergraduate Studies Committee Chair	Printed Name	Date

	DAVID ROSS	11/7/08
2. Academic Unit Graduate Studies Committee Chair	Printed Name	Date

3. ACADEMIC UNIT CHAIR/DIRECTOR	Printed Name	Date
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4. **After the Academic Unit Chair/Director signs the request, forward the form to the ASC Curriculum Office, 4132 Smith Lab, 174 West 18th Ave. or fax it to 688-5678. Attach the syllabus and any supporting documentation in an e-mail to ascurofc@osu.edu. The ASC Curriculum Office will forward the request to the appropriate committee.**

5. COLLEGE CURRICULUM COMMITTEE	Printed Name	Date
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6. ARTS AND SCIENCES EXECUTIVE DEAN	Printed Name	Date
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7. Graduate School (if appropriate)	Printed Name	Date
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8. University Honors Center (if appropriate)	Printed Name	Date
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9. Office of International Education (if appropriate)	Printed Name	Date
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10. ACADEMIC AFFAIRS	Printed Name	Date
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