George Mason University
Graduate Course Approval/Inventory Form

Please complete this form and attach a copy of the syllabus for new courses. Forward it as an email attachment to the Secretary of the Graduate Council. A printed copy of the form with signatures should be brought to the Graduate Council Meeting. Complete the Coordinator Form on page 2, if changes in this course will affect other units.

Please indicate:  _____ NEW  ____ X MODIFY  _____ DELETE

Local Unit: SCS  Graduate Council Approval Date: 

Course Abbreviation: NEUR (from CSI)  Course Number: 734

Full Course Title: Computational Neurobiology

Abbreviated Course Title (24 characters max.): Computational Neurobiology

Credit hours: 3  Program of Record: Neuroscience Ph.D.

Repeatable for Credit?  ___ D=Yes, not within same term  ___ T=Yes, within the same term  ___ X N=Cannot be repeated for credit  Up to hours

Activity Code (please indicate):  ____ X Lecture (LEC)  ___ Lab (LAB)  ___ Recitation (RCT)  ___ Studio (STU)  ___ Internship (INT)  ___ Independent Study (IND)  ___ Seminar (SEM)

Catalog Credit Format:  3:3:0  Course Level:  GF(500-600)  ___ GA(700+)  ____ X____

Maximum Enrollment: 15  For NEW courses, first term to be offered: 

Prerequisites: NEUR 602 and MATH 214, or permission of instructor

Catalog Description (35 words or less): Intense review of neurobiology for graduate students interested in studying how nerve cells integrate and transmit signals, and how behavior emerges from the integrated actions of populations or circuits of nerve cells. Covers electrical and biochemical properties of single neurons, and electrical and chemical communication between neurons. Emphasis is on mathematical descriptions and computational techniques used to study and understand neurons and networks of neurons.

For MODIFIED or DELETED courses as appropriate:

Description of modification: Change number from CSI 734 to NEUR 734. Also change prerequisites.

APPROVAL SIGNATURES:
Submitted by:  ____________________________________________  email: _avrama@gmu.edu________

Department/Program:  ____________________________________________  Date: __________________

College Committee:  ____________________________________________  Date: __________________

Graduate Council Representative: ________________________________  Date: __________________