

**School of Medicine, Doctor of Medicine, Fall 2017**  
**2019-01-17 02:46:41**

<b>Course Abbr</b>	<b>S/T</b>	<b>Course Title</b>	<b>Cr(US)</b>	<b>Cr(ECTS)</b>	<b>Start Date</b>	<b>End Date</b>	<b>Days</b>	<b>Time</b>	<b>Enr</b>	<b>Cap</b>	<b>Faculty</b>	<b>Room</b>
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**If you have any questions regarding the schedule and course registration please contact Office of the Registrar**

**[registrar@nu.edu.kz](mailto:registrar@nu.edu.kz)**