

WESTERN NEW MEXICO UNIVERSITY
Graduate Degree Plan - Educational Leadership (0827)
School of Education

Student Name: _____ ID# _____
 Complete Mailing Address: _____ Telephone: _____
 (incl street, city, state, zip) _____ Advisor: _____
 Email Address: _____ Date Admitted to Graduate School: _____
 Catalog Authority: 2009-10 _____ Date Admitted to EDL Program: _____
 Please Check One: **1st Master's Degree** (36 cr) **2nd Master's Degree** (30 cr) **NM Certification** (24 cr)

Graduate Core Req (9) (1st Master's only)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDUC 500 Methods of Research (3)	_____	_____
EDUC 506 Hist & Phil of Educ (3)	_____	_____
PSY 505 Psychology of Learning (3)	_____	_____

Educational Leadership Core Requirements (21)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDL 520 Curr/Instr/Program Lrng (3)	_____	_____
EDL 523 Prof Devlpmnt/Assessmnt (3)	_____	_____
EDL 524 Char Effective Leadership (3)	_____	_____
EDL 560 Legal Aspects of Educ (3)	_____	_____
EDL 561 School Finance/Budgeting (3)	_____	_____
EDL 581 Beg. Internship in EDL (3)	_____	_____
EDL 582 Adv Internship in EDL (3)	_____	_____

Note: Student must have completed the first five courses of EDL core requirements to qualify for the internship

Educational Leadership Elective Course (3)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDL 525 Education in a Pluralistic Society (3)	_____	_____
EDL 526 Educational Leadership in the Public Domain (3)	_____	_____
EDL 530 Resource Management (3)	_____	_____
EDL 545 Current Educational Trends and Issues (3)	_____	_____

select at least one course from the elective list

Course: _____ (3) _____
 Course: _____ (3) _____

Guided Elective Course (3 cr. for 1st Master's, 6 cr. for 2nd Master's)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
Course: _____ (3)	_____	_____
Course: _____ (3)	_____	_____

Total Credit Hours: _____ **Exit Exam:** _____ **Date:** _____

Copy to Registrar on: Date: _____ **Grad. Audit sent on:** Date: _____

Student Signature: _____ **Date:** _____

Advisor Signature: _____ **Date:** _____

Dean, School of Education: _____ **Date:** _____

**Assoc VP Academic Affairs/
Dir of Graduate Division:** _____ **Date:** _____