

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Master of Arts in Teaching - Secondary Education (0803)
Option 1 - Students without related undergraduate professional education preparation
School of Education

Student Name: _____ ID# _____

Complete Mailing Address: _____ Telephone: _____
 (incl street, city, state, zip)

Email Address: _____ Advisor: _____

Catalog Authority: _____ Date Admitted to Graduate School: _____

Teaching Field: _____ Date Admitted to MAT Program: _____
 (24-36 credit hours approved by NM Dept. of Ed.)

Contextual Knowledge (15)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDUC 500 Methods of Research (3)	_____	_____	BLED 514 Multicultural Education (3)	_____	_____
EDUC 506 Hist & Phil of Education (3)	_____	_____	SPED 508 Intro to Except Children (3)	_____	_____
PSY 505 Psychology of Learning (3)	_____	_____			

Professional Education Requirements (21)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
<u>1. Foundation (7)</u>			<u>2. Application & Reinforcement (8)</u>		
EDUC 564 TEP Field Experience (1)	_____	_____	EDUC 571 Secnd Curric & Instruct (3)	_____	_____
NMTA Basic Skills test passed <input type="checkbox"/> yes			EDUC 574 Classroom Assessment (2)	_____	_____
EDUC 534 Integr Technl in Curric (3)	_____	_____	RDG 560 Reading Skills Secnd Ed (3)	_____	_____
SPED 528 Curr & Methds Spec Ed (3)	_____	_____	<u>3. Capstone (6)</u>		
			EDUC 536 Classroom Management (3)	_____	_____
			EDUC 594 Practice Teaching-Secnd (3)	_____	_____

Content Knowledge Area: _____ NMTA Teacher Competency test passed yes
 NMTA Content Knowledge test passed yes

Total Credit Hours: _____ **Exit Exam:** _____ **Date:** _____
 (minimum of 36 required)

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:** _____

Note: All graduate credit, including transfer credit, must have been earned within the seven years prior to issuance of the graduate degree.