

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

Student Name: _____	ID# _____
Complete Mailing Address: _____ (incl street, city, state, zip)	Telephone: _____
Email Address: _____	Advisor: _____
Catalog Authority: _____	Date Admitted to Graduate School: _____
Expected Completion: _____	Date Admitted to EDL Program: _____
Please Check One: <input type="checkbox"/> 1st Master's Degree (36 cr) <input type="checkbox"/> 2nd Master's Degree (30 cr) <input type="checkbox"/> 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)	_____	_____
EDUC 528 Student Growth & Development		
or PSY 505 Psych 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>
Select 3 or 6 credits chosen from remaining courses in the EDL Elective List or pre-approved 500-level courses in BLED, RDG, or SPED		
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:** _____

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