

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Master of Arts in Teaching - Elementary Education (0802)
Option 1 - Students without related undergraduate professional education preparation
School of Education

Student Name:	ID#
Complete Mailing Address:	Telephone:
(incl street, city, state, zip)	Expected Completion:
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.)	

Core Knowledge (9)

<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)	_____	_____	EDUC 528 Student Growth & Development	_____	_____
EDUC 506 Hist & Phil of Education (3)	_____	_____		(3)	_____

Professional Education Requirements (36)

<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 (10)</u>			<u>3. Reinforcement (12)</u>		
BLED 514 Multicultural Education (3)	_____	_____	EDUC 536 Classroom Management (3)	_____	_____
EDUC 534 Integr Technl in Curric (3)	_____	_____	EDUC 573 Elem Methds/Curric II (3)	_____	_____
EDUC 564 TEP Field Experience (1)	_____	_____	RDG 511 Corrective Reading Instr (3)	_____	_____
SPED 508 Intro to Except Children (3)	_____	_____	SPED 528 Curr & Methds Spec Ed (3)	_____	_____
NMTA Basic Skills test passed <input type="checkbox"/> yes					
<u>2. Application (12)</u>			Content Knowledge Area: _____		
BLED 545 ESL Mthds/Content Lit (3)	_____	_____	NMTA Teacher Competency test passed <input type="checkbox"/> yes		
EDUC 572 Elem Methods/Curric I (3)	_____	_____	NMTA Content Knowledge test passed <input type="checkbox"/> yes		
EDUC 574 Classroom Assessment (3)	_____	_____	<u>4. Capstone (2)</u>		
RDG 510 Teaching of Reading (3)	_____	_____	EDUC 592 Practice Teaching-Elem ()	_____	_____

Total Credit Hours: _____ **Exit Exam:** _____ **Date:** _____
 (minimum of 45 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.