

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Master of Arts in Teaching - Special Education (0808)
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: 2014-15

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)

Contextual Knowledge (13)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDUC 500 Methods of Research (3)	_____	_____
EDUC 506 Hist & Phil of Education (3)	_____	_____
EDUC 528 Student Growth/Dev (3)	_____	_____
NES Basic Skills test passed	<input type="checkbox"/>	yes

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDUC 511 Foundtn of Education (1)	_____	_____
EDUC 534 Integr Technl in Curric (3)	_____	_____
SPED 508 Intro to Except Children (3)	_____	_____
SPED 528 Curr & Methds Spec Ed (3)	_____	_____
SPED 570 Nature & Needs Pers LD (3)	_____	_____

Professional Education Requirements (28)

1. Foundation (9)

Application & Reinforcement - cont.

RDG 510 Teaching of Reading (3)	_____	_____
RDG 511 Corrective Reading Instr (3)	_____	_____
SPED 555 Fam/Schl/Cm/Cltr/Excp C (3)	_____	_____

EDUC 562 Field Experience Lab II (1)	_____	_____
BLED 545 ESL Mthds/Content Lit (3)	_____	_____
SPED 551 Behavior Mgmt Appl (3)	_____	_____
SPED 554 Evaluation & Assessmnt (3)	_____	_____
SPED 569 or SPED 576 Nature & Needs Pers ID or E&BD		

2. Application & Reinforcement (17)

Course: _____ (3) _____

EDUC 536 Classroom Management (3)	_____	_____
EDUC 547 Field Experience Lab I (1)	_____	_____

3. Capstone (2)

SPED 541 Practice Teaching-Sp Ed () _____

Content Knowledge Area: _____

NES Teacher Competency test passed yes

NES Content Knowledge test passed yes

Total Credit Hours: _____
 (minimum of 50 required)

Exit Exam: _____

Date: _____

Copy to Registrar on: Date: _____

Grad. Audit sent on: Date: _____

Student Signature: _____

Date: _____

Advisor Signature _____

Date: _____

Dean, School of Education: _____

Date: _____

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.