

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - Master of Arts in Teaching - Secondary Education (0803)
Option 2 - Students with related undergraduate professional education preparation
School of Education

Student Name: _____ ID# _____

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

Email Address: _____ COE Advisor: _____

Catalog Authority: 2015-16 _____ Teaching Field Advisor: _____

Date Admitted to Graduate School: _____ Date Admitted to MAT Program: _____

Education Core Requirements (9)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
EDUC 500 Methods of Research	(3)	_____
or EDUC 503 Action Research	(3)	_____
EDUC 506 Hist & Phil of Education	(3)	_____
EDUC 528 Student Growth/Develp	(3)	_____

Major Teaching Field (27)

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

NES Secondary Teacher Competency Score: _____ NES Content Knowledge Score: _____

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

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

Student Signature: _____ **Date:** _____

COE Advisor Signature: _____ **Date:** _____

Major TF Advisor Signature _____ **Date:** _____

Associate 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.