**STUDENT INFORMATION**

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| **Student’s Name:**       | **NAU ID:**        |
| **E-mail Address:**      @nau.edu  | **Phone Number:**       |
| **Enrollment Term:**        (ex. Summer 2016) | **Expected Graduation:**       (ex. Spring 2019) |
| **Advisor:**       |
| **Total Required Credits for this Degree Program: 30** |
| **This is the:** [ ]  **Initial** (upon admission) [ ]  **Final** (submitted with Graduation Application) **Program of Study** |

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/E/P\*\*** |
| 1. **Core Requirements (12 units required)**
 |
| \* | ESE 548 | Survey of Special Education |       |       |       |       |       |       |
| \* | ESE 698 | Graduate Seminar *Pre-req: ESE 548 or Special Education Survey Milestone* |       |       |       |       |       |       |
| 1. **Select ONE course from the following courses (3 units required):** EDR 610, EDR 611, or EPS 525.
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| \* |       |       |       |       |       |       |       |       |
| 1. **ESE Elective or Educational Foundation Course (3 units required):** ESE elective, or students with no coursework in Educational Foundations must take one course in Educational Foundations in place of the special educational elective.
 |
| \* |       |       |       |       |       |       |       |       |
| 1. **Graduate Certificate or Emphasis Area (Select one)**
 |
| 1. [ ]  **Cross-Categorical/High Incidence Special Education Emphasis (18 units required)**
 |
| \* | ESE 520 | Bilingual and Multicultural Aspects of Special Education |       |       |       |       |       |       |
| \* | ESE 608-HI | Fieldwork Experience (3 credits) |       |       |       |       |       |       |
| \* | ESE 625 | Advanced Classroom Management Strategies *Pre-req: ESE 548 or Special Education Survey Milestone* |       |       |       |       |       |       |
| \* | ESE 656 | Advanced Assessment Practicum*Pre-req: ESE 655 or EPS 664* |       |       |       |       |       |       |

Student’s Name:       NAU ID:

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| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/E/P\*\*** |
| \* | ESE 660 | Theories and Advanced Methods for Learning Disabilities*Pre-req: ESE 548 or Special Education Survey Milestone* |       |       |       |       |       |       |
| \* | ESE 670 | Theories and Advanced Methods for Emotional Disabilities*Pre-req: ESE 548 or Special Education Survey Milestone* |       |       |       |       |       |       |
| 1. **[ ]  Early Childhood Special Education Emphasis (18 units required)**
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| \* | ECI 620 | Early Childhood Curriculum |       |       |       |       |       |       |
| \* | ESE 516 | Patterns and Variations of Child Development |       |       |       |       |       |       |
| \* | ESE 536 | Foundations of Early Childhood Special EducationPre-req: ESE 548 or Special Education Milestone Survey |       |       |       |       |       |       |
| \* | ESE 556 | Methods of Early Childhood Special Education*Pre-req: ESE 536 or 548* |       |       |       |       |       |       |
| \* | ESE 585 | Introduction to Positive Behavior Support |       |       |       |       |       |       |
| \* | ESE 608-ECSE | Fieldwork Experience (3 credits) |       |       |       |       |       |       |
| 1. **[ ]  Disability Special Education Emphasis (18 units required)**
 |
| \* | DIS 503 | Contexts of Disability in Society |       |       |       |       |       |       |
| \* | DIS 507 | Advanced Principles and Practices of Family Support, Self-Determination, and Disability |       |       |       |       |       |       |
| \* | DIS 697 | Independent Study |       |       |       |       |       |       |
| \* | DIS 608 | Fieldwork Experience |       |       |       |       |       |       |
| \* | DIS 698 | Graduate Seminar |       |       |       |       |       |       |
| 1. **Select ONE course from the following courses (3 units required):** DIS 517 or DIS 518.
 |
| \* |       |       |       |       |       |       |       |       |
| 1. **[ ]  Graduate Certificate (18 units required):** [Assistive Technology](http://catalog.nau.edu/Catalog/details?plan=ASSTTCHCT&catalogYear=1415), [Autism Spectrum Disorders (School-Based)](http://catalog.nau.edu/Catalog/details?plan=AUTSPCT&catalogYear=1415), [Culturally and Linguistically Diverse Special Education](http://catalog.nau.edu/Catalog/details?plan=SPCLDECT&catalogYear=1415), or [Positive Behavior Support](http://catalog.nau.edu/Catalog/details?plan=POSBEHCT&catalogYear=1415) - School-Based Option.
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| \* |       |       |       |       |       |       |       |       |
| \* |       |       |       |       |       |       |       |       |
| \* |       |       |       |       |       |       |       |       |
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| \* |       |       |       |       |       |       |       |       |
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Student’s Name:       NAU ID:

**Additional Information**

Please Note:

* If students choose to earn a certificate, 3 units of electives must be taken in addition to listed plan requirements.
* This program of study is appropriate for students who are not seeking certification in special education.
* Students cannot apply for teaching certification under this program of studies.

In addition to all University and Graduate College policies, procedures, and requirements, graduate students must also adhere to the academic requirements, policies, procedures, and criteria outlined by their program’s Graduate Student Handbook.

**Students:**

You must secure official approval by your advisor and Department Chair/Director before submitting the final Program of Study.

By signing or entering your name below, you agree to the following statement:

 *“Students are responsible for complete knowledge of Academic Catalog requirements in their degree plan for their catalog year and adhering to all policies in the Academic Catalog.”*

**Advisors and Chairs/Directors:**

Please indicate approval of the curriculum on the Program of Study by placing your signature (electronic signatures are permitted) in the space provided.

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| **Student:**       | **Date:**       |
| **Advisor:**       | **Date:**       |
| **Chair** (required for Final)**:**       | **Date:**       |

**\*\*Transfer/Equivalent/Previous Graduate Degree** – Must have Advisor approval

Transfer T = Course transferred from another university

Previous Graduate Degree P = Course taken at NAU from previous graduate degree

Equivalent E = Course taken at NAU in place of required course

Internal Transfer I = Graduate level course taken as undergraduate; Not applied to undergraduate degree

**Transfer Credit Example:**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **\*** | **Course No.** | **Course Title** | **Replacement Course** | **Semester** | **Year** | **Units** | **Grade** | **T/E/P\*\*** |
|  | **ABC 123** | **Fundamentals of English** | **ASU 456** | **Fall**  | **2012** | **3** | **A** | **T/ASU** |