



PLAN OF STUDY
FEINSTEIN SCHOOL OF EDUCATION AND HUMAN DEVELOPMENT
GRADUATE STUDIES

Name _____ ID# _____ Date _____

Email _____ Phone _____

Department _____

Program: Masters of Education in Exceptional Learning Needs

Please submit a signed original to the Feinstein School of Education and Human Development (FSHED) Graduate Studies Office. Students should complete this form with the assistance of and approval of the Graduate Advisor. Although an applicant may be recommended for acceptance to a graduate program, the applicant cannot be considered an officially accepted degree candidate until an approved Plan of Study is on file in the FSEHD Graduate Studies Office. Changes in the Plan of Study can be made with the graduate advisor's approval by completing the Change of Plan of Study Form.

PLAN OF STUDY

Dept. Course # Course Title Credits

Required Core Content

Table with 4 columns: SPED, Course #, Course Title, Credits. Rows include SPED 503, 505, 518, 534, 558, 648 with corresponding course titles and credit values.

Selected Strand Coursework

Table with 4 columns for course selection, currently empty.

Not for Program Credit

Table with 4 columns for non-program credit courses, currently empty.

Credits Transferred _____
Total Credits _____

Thesis-----Yes _____ No X

Comprehensive Assessment ----- Yes [check] No _____

Student _____

Date _____

Advisor _____

Date _____

Program Director _____

Date _____

Department Chairperson _____

Date _____

Director of Graduate Studies _____

Date _____