

Date Mailed to Dean of Graduate Studies: _____

M.A.Ed. in DHH

EASTERN KENTUCKY UNIVERSITY
THE GRADUATE SCHOOL - Coates Box 5A 3101
PLANNED PROGRAM FORM

(Student's Name) _____ (Soc. Sec. No.) _____ (Street) _____ (City) _____ (State & Zip) _____

Degree _____ with an emphasis in _____

Signature of Advisor & Date _____

Prerequisites: Completion of undergraduate or graduate certification program in Deaf and Hard of Hearing (DHH) before enrollment in SED 803, 809, 832, and 886. Student must have DHH teaching certification (or statement of eligibility) and must have filed for Candidacy before enrolling in the last twelve (12) hours of the M.A.Ed. program.

TRANSFER OF CREDIT (If appropriate)

Institution	Course Number & Title	Credit Hrs.	Grade	Date Completed	Comments

EKU GRADUATE CREDIT

Course Number & Title	Credit Hrs.	Grade	Date Completed	Comments
Professional Core:				
EDF 869 Research in Education	3			
EPY 816 Tests & Measurement	3			
EDF 837, 839, 850, or 855	3			
Special Education Core:				
SED 803 Advanced Spec Ed. Assessment	3			
SED 809 Diagnostic & Prescriptive Teach-DHH	3			
SED 832 Written Language of DHH	3			
SED 886 Seminar in Special Education	3			
Electives: (Pre-Approved by Advisor)				
	3			
	3			
	3			

TOTAL GRADUATE PROGRAM HOURS _____

Anticipated Date of Graduation _____

Thesis required: NO Language form required: NO

Statistics form required: NO

APPROVED

Department Chair & Date

Dean, Graduate Studies and Research & Date

TIME LIMIT: THIS PROGRAM MUST BE COMPLETED BY _____ TO AVOID LOSING COURSE CREDITS.
PROGRAM CHANGES MUST BE APPROVED USING THE APPLICATION FOR A CHANGE IN THE PLANNED CURRICULUM FORM.