

M.Ed. or C.A.E.S./ Teacher of Students with Severe and Multiple Disabilities*

CLASS ENTERING 2008

TO BE SUBMITTED DURING THE SECOND TERM OF ENROLLMENT IN THE PROGRAM,
PRIOR TO THE OPENING OF REGISTRATION FOR THE THIRD TERM OF ENROLLMENT

NAME _____ ANTICIPATED COMPLETION DATE _____

SEMESTER/YEAR

BC ID _____ M.Ed. C.A.E.S. COMPREHENSIVE EXAMS DATE _____

MONTH/YEAR

CHOOSE ONE:

Initial License: I am seeking an initial license and will take items checked in Column A.**

Already licensed: I have an initial teaching license and will take items checked in Column B.**

COURSE NUMBER AND TITLE	A	B	CREDITS	SUMMER	FALL	SPRING	T/W***
PY 418 Applied Child Development	√		3				
ED 435 Social Contexts of Education	√		3				
ED 438 Instruction of Students with Special Needs and Diverse Learners	√		3				
ED 495 Human Development and Disability		√	3				
ED 520 Teaching Mathematics and Technology	√		3				
ED 542 Teaching Reading	√		3				
ED 546 Teaching about the Natural World	√		3				
ED 374 Behavior Management	√	√	3				
ED 384 Teaching Strategies for Students with Multiple Disabilities	√	√	3				
ED 389 Assessment of Students with Low-Incidence and Multiple Disabilities	√	√	3				
ED 398 Working with Families and Social Service Agencies	√	√	3				
ED 540 Ed. Implications / Sensory, Motor, and Health Impairments	√	√	3				
ED 686 Augmentative Communication	√	√	3				
PRACTICUM REQUIREMENTS							
ED 431 Graduate Inquiry Seminar	√	√	1				
ED 429 Graduate Pre-Practicum Experience	√		1				
ED 432 Graduate Inquiry Seminar	√	√	2				
ED 420 Graduate Practicum	√	√	6				
ED 888 Master's Comprehensive Examinations	√	√	0				
Total credits	46	30					

SEE EXPLANATORY NOTES ON NEXT PAGE.

STUDENT SIGNATURE _____

DATE _____

APPROVAL

ADVISOR OR
DIRECTOR OF
STUDENT
SERVICES

YES NO _____
NAME

SIGNATURE

ASSOCIATE
DEAN OF
GRADUATE
STUDIES

YES NO _____
NAME

SIGNATURE

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NOTES:

*Completing these courses of study does not guarantee licensure. For teaching in Massachusetts, you must pass the Massachusetts Test of Educational Licensure and apply for licensure from the Massachusetts Department of Education. Other rules apply in other states and countries.

**After consultation with an advisor and review of the undergraduate transcript.

***Insert a T (transfer) or W (waiver) as appropriate. If seeking a transfer of credits, you must also fill out a "transfer request form" available online. If requesting a waiver, you must attach an official transcript to this form. Students are strongly discouraged from applying for waivers for the pre-practicum experience. Waivers will only be granted to students with *extensive* teaching experience.