

APPLICATION FOR ADMISSION TO CANDIDACY
AND PROGRAM OF STUDIES
MASTER OF EDUCATION IN ENGLISH

Name

Street Address

City, State Zip

Date

Telephone #

Student I.D. # email:

CORE COURSES	SEM/YR	CR. HR.	GRADE	REGISTRAR'S USE
EDUCATION 6001		3		
EDUCATION 6002		3		
EDUCATION 6004		3		
ENGLISH 6901		3		
ENGLISH 7990		3		
TOTAL		15		
TEACHING FIELD				
ENGLISH		3		
ENGLISH		3		
ENGLISH		3		
ENGLISH		3		
ENGLISH		3		
TOTAL		15		
TOTAL HOURS		30		

I _____ (am) _____ (am not) seeking teacher certification and I approve this program of study. (Those not seeking certification must also put on file a letter to that effect.)

I have completed _____ Graduate Hours. I expect to complete the program _____ Semester, 20 _____.

Student's Signature

Head of Department

Major Advisor

Director of Graduate Studies

Coordinator, MEd Program

Registrar

