

DHHT

(1) \_\_\_\_\_

Matriculation Semester (circle one):

Summer      Fall      Spring

(2) \_\_\_\_\_

**THE COLLEGE OF NEW JERSEY**  
ACADEMIC EVALUATION

REQUIREMENTS for the **MASTER OF ARTS IN TEACHING PROGRAM:**  
**DEAF & HARD OF HEARING/ELEMENTARY EDUCATION**

NAME: \_\_\_\_\_ SS# \_\_\_\_\_

**COORDINATOR/ADVISOR: Dr. Barbara Strassman**

Retain this sheet to record progress toward your degree. Eligibility for graduation requires:

- 1) Satisfactory completion of courses printed below;
- 2) A minimum of 30 graduate semester hours earned at The College of New Jersey
- 3) A minimum total of 34 graduate semester hours of core coursework
- 4) A cumulative Grade Point Average of 3.0
- 5) Completion of all departmental requirements/prerequisites

<b>Required Courses</b>	<b>S.H.</b>		<b>Term</b>
	<b>Credit</b>	<b>Grade</b>	<b>Taken</b>
<b>RESEARCH</b> <span style="float: right;"><b>3 S.H.</b></span>			
EDFN 508 Introduction to Research	<u>3</u>	_____	_____
<b>FOUNDATIONS AND MULTICULTURAL EDUCATION</b> <span style="float: right;"><b>3 S.H.</b></span>			
EDFN 521 Cultural Foundations of Education			
OR			
EDFN 520 Social Problems in Education	<u>3</u>	_____	_____
OR			
EDFN 500 Foundation of Education			
<b>SPECIALIZATION</b> <span style="float: right;"><b>30 S.H.</b></span>			
*SPED 530 Speech Development for the Deaf	<u>3</u>	_____	_____
EDUC 513 Collaboration, Consultation, and Partnerships	<u>3</u>	_____	_____
*RDLG 537 Language Arts Literacy	<u>3</u>	_____	_____
RDLG 570 Issues in Literacy Instruction			
OR			
RDLG 579 Reading in the Content Areas	<u>3</u>	_____	_____
ESLM 578 Theory & Practice of Teaching ESL			
OR			
ESLM 525 Second Language Acquisition	<u>3</u>	_____	_____
OR			
ESLM 587 Curriculum and Methods for Multicultural Population			
SPED 690 Culminating Field Experience DHH	<u>6</u>	_____	_____
SPED 597 Special Topics: _____	<u>1</u>	_____	_____
ELEM 695 Culminating Field Experience Elementary Ed	<u>6</u>	_____	_____

\*Requirements to be completed during undergraduate portion of program.

**COMPREHENSIVE EXAMINATION**

**DHHT**

Date Taken \_\_\_\_\_ Result \_\_\_\_\_

Final Audit Date \_\_\_\_\_ Status \_\_\_\_\_ Auditor's Signature

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