



GRADUATE PROGRAM

Degree Self-Audit Form



Student Name _____ LC ID# _____

Teach Completer MAT Degree Plan of Study

Done ✓	Course Number	Course Title	Hrs	Semester Course Taken	Grade Earned
<input type="checkbox"/>	ED 570	The Professional Teacher	9	_____	_____
<input type="checkbox"/>	ED 571	Seminar in Teaching Success	3	_____	_____
<input type="checkbox"/>	ED 572	Seminar in Teaching Success	3	_____	_____
<input type="checkbox"/>	ED 573	Practitioner Internship (Fall) *	3	_____	_____
<input type="checkbox"/>	ED 573	Practitioner Internship (Spring) *	3	_____	_____
<input type="checkbox"/>	ED 574	Methods in ELA/Reading	2	_____	_____
<input type="checkbox"/>	ED 576	Methods in Math/Science	2	_____	_____
<input type="checkbox"/>	ED 601	Teaching with Significance	3	_____	_____
<input type="checkbox"/>	ED 575	Practicum in ELA/Reading	1	_____	_____
<input type="checkbox"/>	ED 577	Practicum in Math/Science	1	_____	_____
<input type="checkbox"/>	ED 600	Ed. Leadership Research	3	_____	_____

* - Taken twice

PLEASE NOTE:

1. A total of 33 Hours must be earned for this degree
2. Must have a cumulative "B" (3.0) average or better
3. No more than 2 C's may be earned
4. Any course in which a grade below C is earned must be repeated

Total Hours _____ of 33

This form must be completed by the student, attached to the GRADUATE LEVEL GRADUATION APPLICATION FORM and submitted with the \$100 application fee no later than the end of the second week of the semester prior to the semester of anticipated graduation.