**Master of Education (M.Ed.) in Teaching and Learning**

**Special Education Focus**

**Department of Teaching & Learning**

**Phyllis J. Washington College of Education**

**University of Montana**

Complete this plan, have your advisor sign, and submit to Teacher Education Services during the first term of enrollment.

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| --- | --- |
| Name: | Student ID #: |
| Address: | Phone #: |
| Email: | Advisor: |

**Core Courses**

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| --- | --- | --- | --- |
| **Course #** | **Title** | **CR** | **Semester** |
| EDU 501 | Curriculum Design, Implementation, & Evaluation | 3 |  |
| EDU 520 | Educational Research | 3 |  |
| EDU 50x | Foundations of Education, select one where x = 2, 4 or 10 | 3 |  |
| EDU 514 | Education Across Cultures | 3 |  |
| EDU 515 | Computer and Other Technology Applications in Education | 3 |  |
| EDU 518 | Inclusion and Collaboration | 3 |  |

**Directed Courses:**

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| **Course #** | **Title** | **CR** | **Semester** |
| EDU 438 | Literacy Assessment, Diagnosis and Instruction | 3 |  |
| EDSP 401 ***or***  EDSP 403 | Intro to Early Intervention  Curr/Methods Early Special Education | 3 |  |
| EDSP 405 | Assessment of Students with Exceptionalities | 3 |  |
| EDSP 426 (or EDSP 526) | Transition and Community Supports | 3 |  |
| EDSP 454 | Advanced Academic Interventions | 3 |  |
| EDSP 456 (or EDSP 556) | Methods of Low Incidence Disabilities | 3 |  |
| EDSP 461 | Positive Behavior Supports | 3 |  |
| EDSP 462 | Special Ed Law, Policy and Practice | 3 |  |
| EDSP 495 | Student Teaching: Special Education | 6 |  |

All requirements for the degree must be completed within six years, including successful completion of a departmental comprehensive examination and 36 graduate credits minimum. Students must file an "Application for Graduation" form by the deadline listed on the Graduate School website, umt.edu/grad. Date for Comprehensive Examination: \_\_\_\_\_\_\_\_\_\_

Advisor’s Signature and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s Signature and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_