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Reset Form

Print Form

TEXAS A&M UNIVERSITY OFFICE OF GRADUATE STUDIES DEGREE PLAN

[Submit the original and three (3) copies]

Name	Dept	Date
	TLAC	

My proposed course of study in partial fulfillment of the degree of M.S (for M.S. and M.A. degrees, select ☐ Thesis option or ☑ Non-Thesis option), **with a major in , is submitted for the approval of the Office of Graduate Studies.**

Dept. Abbr.	Course No.	Course Title	Credit Hours	Final Grade
EDCI	601	Culutral Foundations of Education	3	
EDCI	644	Curriculum Development	3	
EDCI	673	Analysis of Teaching Behavior	3	
		Approved Elective	3	
		Approved Elective	3	
		Approved Elective	3	
		Approved Elective	3	
		Approved Elective	3	
EDCI	691	Research	8	
Total hours listed for credit			32	

PREREQUISITES OR OTHER COURSES **Not applicable for Graduate credit**		I understand that additional course work may be added to this proposed course of study by my Advisory Committee, if such additional work is needed to correct deficiencies in my academic preparation.

Approval Recommended

Chair:	E-mail	(Dept.)	(Signature of Student)	E-mail	UIN
Member:	E-mail	(Dept.)	(Student's Mailing Address)		
Member:	E-mail	(Dept.)	Member:	E-mail	(Dept.)
Member:	E-mail	(Dept.)	Member:	E-mail	(Dept.)
			Member:	E-mail	(Dept.)
Department Head OR Intercollegiate Faculty Chair:			For the Office of Graduate Studies		Date