



Minot State UNIVERSITY

PROGRAM OF STUDY SPECIAL EDUCATION CERTIFICATE Deaf/Hard of Hearing

Graduate School

NAME: _____ ID# _____

Admitted students are required to file this form in the Graduate School no later than the completion of their first 9 semester hours. Complete, route for signatures, and deliver or email the completed form to: graduate@minotstateu.edu.

REQUIRED COURSES	PROJECTED SEMESTER (YR)				
	SH	Fall	Summer	Spring	Grade
<i>Pre-requisites (5 SH)</i>					
SPED 592 Special Topics - Audiology for Educators	3				
SPED 592 Special Topics - Foundations of D/HH Ed.	2				
(Sign Language pre-rq may apply)					
<i>Courses (26 SH)</i>					
SPED 510 Intro To Disability Services	3				
SPED 513 Deaf Studies	3				
SPED 515 Practicum	4				
SPED 565 Early Intervention: Deaf/HH	3				
SPED 583 Teaching Speech in Deaf/HH	3				
SPED 584 Teaching Language to Deaf/HH	3				
SPED 585 Advance Aural Rehabilitation	3				
SPED 586 Teaching Reading/Academics to DHH	4				
REQUIRED CREDITS	31				

SIGNATURES:

Student: _____ ID# _____ Date: _____

Program Director: _____ Date: _____

Department Chairperson: _____ Date: _____

***Maximum 7 year time limit to complete degree. Outside transfer credit must be approved with Program Director. See catalog policies for TIME REQUIREMENT & TRANSFER CREDIT.**

***Course Deviations require the Program Director to submit a "Course Substitution" form to the Registrar's office.**

***Any changes to original plan requires an updated Program of Study to the Graduate School.**