

TEXAS SOUTHERN UNIVERSITY
Masters of Education Degree Plan
Bilingual Education Specialization

DATE:		Student ID#			
STUDENT NAME:			Home Phone:		
Address:			Work Phone:		
City/State:			Cell Phone:		
			Email:		
Major: CURRICULUM & INSTRUCTION		Education Minor: N/A			
Master Comprehensive Exam Date:					
English Proficiency Exam Date:		Results:	Passed	Failed	Date:
Applied and Recommended for Candidacy:			Date:		
Applied for Graduation:		Date:		Approved:	

Area	Course No.	Hrs	Course Title	Planned	Completed	Grade
Foundations Core (9schs.)	EDCI 531	3	Classroom Management			
	EDCI 540	3	Curriculum and Instruction			
	EDCI 551	3	Instructional Strategies			
subtotal		9				
Specialization:						
Minimum (18 schs)	EDCI 501	3	The Bilingual Curriculum			
	EDCI 544	3	Development of English Language Skills			
	EDCI 606	3	Linguistics Foundation of Bilingual Education			
	EDCI 644	3	Teaching Content Area in Spanish			
	EDCI 701	3	Applied Linguistics			
	EDCI 844	3	Language Acquisition and Culture			
	RDG 875		Practicum in Reading I			
subtotal		21				
Resources & Research (6 hours)	EDCI 633 Or EDFD 633	3	Educational Research			
	EPSY 831	3	Educational Statistics			
	subtotal		6			
TOTAL HOURS (minimum)		36				

Approval Signatures:		DATE:	
Advisor:		Department Chair:	
Education Dean:		Graduate Dean:	
Student:			
"I have been informed and understand the contents of this degree plan" _____			

Note: When coming in for a conference concerning your program, always bring a copy of your degree plan.

Copies: **Advisor** **Graduate Dean** **Education Dean** **Student**