



**Licensure Plan  
K – 12 Education**

Name \_\_\_\_\_ ID# \_\_\_\_\_ Date \_\_\_\_\_

Admitted to Program \_\_\_\_\_ Emphasis Area \_\_\_\_\_ Catalog \_\_\_\_\_

Course Information	Field Lab Hrs.	Course Sub	Term/Yr	Grade	Credit Hrs
<b>Prerequisite to Professional Core:</b>					
ED 200: Perspectives in Teaching and Learning	30				3
ED 220: The Exceptional Learner	10				3
<b>PLACE: Date taken:</b>			<i>Date passed:</i>		
<b>Senior Block:</b> Admission to the Teacher Education Program required. <i>These courses must be taken concurrently.</i>					
ED 416: Classroom Instruction & Management – Secondary/K-12					2
ED 426: Educational Practices & Assessment – Secondary/K-12					2
ED 429: Content Area Literacy					2
ED 436L: Field Experience Lab – Secondary/K-12	120			P/F	3
Content Methods					3-9
<b>Student Teaching:</b>					
ED 455: Student Teaching – K-12	640			P/F	15
<b>Total Licensure Program Hours</b>	<b>800</b>				<b>33-39</b>
<b>Major Content Area Hours</b> (Not including content methods courses)					<b>41-47</b>

*Note: All students are required to complete 120 academic hours to meet graduation requirements. Students must pass the PLACE content area exam before student teaching semester; scores must be received by teacher education no later than the 7<sup>th</sup> week of the Fall or Spring semester prior to student teaching or you will not be placed for student teaching.*

I have reviewed this plan with my advisor. I understand that I am responsible for completing all degree requirements, for consulting with my advisor on a regular basis, for seeking the advice of my advisor in the event I have any questions about degree requirements, and for securing prior approval from my advisor for any change in my degree plan. I understand that deviating from this agreed plan could delay my graduation.

\_\_\_\_\_  
Student Date  
**FINAL REVIEW:**

\_\_\_\_\_  
Education Advisor Date

\_\_\_\_\_  
Student Date

\_\_\_\_\_  
Education Advisor Date

\_\_\_\_\_  
Department Chair Date