

**MASTER OF ARTS
Higher Education Administration and Leadership (HEAL)
Degree Plan**

Student Name: _____

ID# _____

REQUIRED CORE:	HRS	TRANS/SUB	SEM TAKEN	GRADE
HEAL 500 Historical and Contemporary Issues in HE	3		Fall	
HEAL 510 Administrative and Academic Collaboration	3		Fall	
HEAL 520 Leadership in Minority Serving Institutions	3		Spring	
HEAL 530 Finance and Budgeting in Higher Education	3		Spring	
HEAL 540 Leading for Student Success in MSIs	3		Summer	
HEAL 550 Politics and Policy in Higher Education	3		Summer	
HEAL 560 Data Analysis in Higher Education	3		Fall	
HEAL 570 Legal Issues in Higher Education	3		Fall	
HEAL 580 Planning, IR, and Assessment	3		Spring	
HEAL 581 Practicum in Planning, IR, and Assessment	2		Spring	
HEAL 590 Entrepreneurship in Higher Education	3		Summer	
HEAL 591 Practicum in Entrepreneurship in Higher Education	2		Summer	
HEAL 598 Portfolio I	1		Spring	
HEAL 598 Portfolio II	1		Summer	
PROGRAM HOURS	36			

A maximum of six (6) semester hours may be transferred from accredited institutions. Students must complete the Petition for Transfer Form.

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 questions about degree requirements and for securing prior approval of my advisor for any change in my degree plan.

ANTICIPATED SEM/YR GRADUATION: Summer

SIGNATURES:

STUDENT

DATE

PROGRAM DIRECTOR/ADVISOR

DATE