

State University College at Buffalo
 1300 Elmwood Avenue
 Buffalo, NY 14222



SCHOOL of ARTS AND HUMANITIES

**ENGLISH EDUCATION (7-12):
 MASTER OF SCIENCE IN EDUCATION
 APPLICATION FOR ADMISSION TO CANDIDACY**

(To be submitted after completion of at least six (6), but not more than twelve (12) credit hours.)

NAME _____ BANNER ID _____
 (Last) (First) (M.I.)
 ADDRESS _____ PHONE _____
 CITY _____ STATE _____ ZIP _____

NOTE: A MINIMUM OF 15 HOURS OF GRADUATE WORK MUST BE COMPLETED IN 600-700 LEVEL COURSES.
 REQUIRED ENGLISH COURSES (15 Hrs.)

Course Title and No.	Sem. Hrs.	Grade	Anticipated Completion Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

INCLUDING ONE OF THE FOLLOWING OPTIONS*

English 695 Thesis (6)	_____	_____	_____
English 690 Master's Project (3)	_____	_____	_____
Comprehensive Examination (0)	_____	_____	_____

PROFESSIONAL EDUCATION* (15 Hrs.)

English 693 Research Design in the Teaching of English (3)	_____	_____	_____
English 692 Teaching of Writing (3) OR	_____	_____	_____
English 691 Advanced Study in the Teaching of English (3)	_____	_____	_____
Multicultural Studies Education - _____ (3)	_____	_____	_____

Two Other Courses in Professional Education. Possible courses include ENG 691, 692, or 670 (Graduate courses from other appropriate departments such as Exceptional Education, Educational Foundations, and Elementary and Reading should be discussed with advisor.)

MINIMUM PROGRAM REQUIREMENTS: 30 Hrs.

*Courses to be selected by advisement **As stipulated in admission review

The following courses completed at OTHER INSTITUTIONS are presented for evaluation as part of the Master's Degree. (10 semester hours maximum for graduate of SUNY units or if work is to be transferred from other units of SUNY; in all other instances, 6 semester hours is the maximum hours eligible for transfer.) Only courses with grade A or B are acceptable. Official transcripts must be sent by the college or university to the Office of Graduate Studies.

Name of Institution	Course	Sem. Hrs.	Grade	Anticipated Completion Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

This program as outlines above has been reviewed. The applicant agrees to complete the program as described in order to meet the degree requirements . The candidate further agrees to abide by all regulations published in the graduate catalog.

NYS PROVISIONAL CERTIFICATE

_____ Date _____	_____ Date _____	_____ Candidate _____
	_____ Date _____	_____ Advisor _____
	_____ Date _____	_____ Department Chair _____
	_____ Date _____	_____ Dean, Arts and Humanities _____

NOTE: Changes in approved program must be requested on the form available from Department or Graduate office. Changes must be approved by Advisor.