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| **PeopleSoft ID#:** |  |  |
| **Name:** |  |  |  |
|  **First Name** | **Middle Initial** | **Last Name** |  |
| **Local Address, City, State, Zip:** |
| **Home Address, City, State, Zip:** |
| **Cell/Local Phone:** | **Home Phone:** | **First Neag Semester: Fall 2018** |
| **Email:** | **Planned Graduation: Spring 2020**  |
|  |

**Directions:**

1. The form requires a current version of Microsoft Word. Go to software.uconn.edu to download free and up-to-date version.
2. Submit one copy of typed and printed Plan of Study and one copy of printed unofficial transcript to: Room 303, Gentry Building.
3. Preliminary Plan must be submitted by November 1 of junior year.
4. Fill in ALL sections, including grades (if completed course), course numbers and titles. Include all previous, current and future courses.
5. Abbreviate semester/year as: “F” for Fall, “S” for Spring, “SS” for Summer, “I” for Intersession (e.g., F18 for Fall 2018 semester).
6. For AP courses and transfer courses from other institutions, use “T” for semester/year, but leave grade area blank as grades do not transfer.
7. For Early College Experience (ECE) courses, list the semester/year as it appears on your transcript (usually first semester at UConn).

**Pass/Fail Rule:** Students may NOT elect the Pass/Fail option to fulfill general education, subject area major, or professional education requirements.

**Professional Education Courses**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dept.** | **No.** | **Course Title** | **Credits** | **Semester/Year** | **Grade** |
| EDCI | 3100/W | Multicultural Education, Equity and Social Justice | 3 | F18 |  |
| EPSY | 3010 | Educational Psychology | 3 |  |  |
| EGEN | 3100 | Seminar/Clinic | 3 | F18 |  |
| EPSY | 3110 | Exceptionality | 2 | F18 or S19 |  |
| EDCI | 3215 | Introduction to Secondary Methods & Clinic | 3 | S19 |  |
| EDCI | 4010 | Teaching Reading & Writing in the Content Areas | 2 | S19 |  |
| EPSY | 3125 | Classroom and Behavior Management | 3 | F19 |  |
| EDCI | 4205W | Methods of Foreign Language Instruction | 3 | F19 |  |
| EGEN | 4100 | Seminar/Clinic | 3 | F19 |  |
| EPSY | 4010 | Assessment of Learning  | 2 | S20 |  |
| EDCI | 4250 | Directed Student Teaching | 9 | S20 |  |
| EGEN | 4110 | Seminar/Clinic | 3 | S20 |  |
|  |  | **Total Professional Education Credits** | **38** |  |  |

**Subject Area Major Courses**

|  |
| --- |
| *36 credits of German with a minimum of 12 credits in related areas and up to 6 credits at the 1000’s level with permission of advisor.* |
| **Dept.** | **No.** | **Course Title** | **Credits** | **Semester/Year** | **Grade** |
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|  |  | **Total Subject Area Major Credits** |       |  |  |

**General Education Requirements**

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| --- | --- | --- | --- | --- | --- |
| **Content Area** | **Dept.** | **Course No.** | **Credits** | **Semester/Year** | **Grade** |
| **[ ]**  | World Languages (3 years single world language in high school) |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | English 1010 or 1011 or 2011 | ENGL |  |  |  |  |
|  | “W” Course | EDCI | 4205W | 3 | F19 |  |
|  | “W” Course |  |  |  |  |  |
|  | “Q” Course |  |  |  |  |  |
|  | “Q” Course |  |  |  |  |  |
| *Courses in Content Areas 1-3 must be in SIX different departments. One Content Area 4 course can also be used toward CA 1, 2, or 3.* |
| 1 | Arts & Humanities – US History | HIST | 1501 or 1502 | 3 |  |  |
| 1 | Arts & Humanities |  |  |  |  |  |
| 2 | Social Sciences |  |  |  |  |  |
| 2 | Social Sciences |  |  |  |  |  |
| 3 | Science & Technology – General Psychology | PSYC | 1100 | 3 |  |  |
| 3 | Science & Technology with Laboratory |  |  |  |  |  |
| 4 | Diversity (international)  |  |  |  |  |  |
| 4 | Diversity  |  |  |  |  |  |

**Clinical Placement Data**

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| --- | --- | --- | --- |
| **School(s)** | **Semester/Year** | **Co-op / Clinic Teacher** | **Grade Level** |
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**Total Combined Credits:**

(Credits must total at least 120, with a minimum GPA of 2.2.
Math 1010 credits cannot be used towards this goal.)

**Signatures**

 **Student’s Signature Date**

 **Faculty Advisor’s Signature Date**

 **Dean’s designee Signature (after review of submitted plan) Date**