Wayne State University College of Education

Education Specialist - Plan of Work - Special Education Administrator with Central Office Administrator Certification

	eting prerequisites				eting this form.	lent is respons	ible for	
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Name: WSU (Last, First, Middle/Maiden								
	(Last, First,	Middle/Maide	en					
Ad	ldress:							
	(Numbe	r & Street Nam	e, City, Sta	te, Zip)				
Address: Number & Street Name, City, State, Zip)								
Tel	lephone Hom	e:		Cell	: Email:	Email:		
MAJOR: ADMINISTRATION & SUPERVISION								
	CHEC	CK ONLY CO	URSES P	ROPOSED	FOR THE EDUCATION SPECIALIST CERTIFIC	CATE		
			T	T	COVER OF THE P	T	T	
1	UNIVERSITY	SEM/YR	DEPT	COURSE	COURSE TITLE	SEM. HRS.	GRADE	
			EDA	7660	Administrative Leadership in School-Community Relations	3		
M			EDA	7675	Public School Finance and Budgeting	4		
			EDA	7800	Administration and Supervision of Special Education	4		
			EDA EDA	7810 7820	Michigan Special Education Law Emergent Policies in Special Education Administration	2		
\square		EDA 7830 Practicum in Special Education Administration and Supervision				3		
$\frac{\square}{\square}$			EDA	8630	Supervision of Instruction	4		
			EDA	8650	Staff Development and School Improvement	3		
			LDT	8135	Technology Applications in Central Administration	3		
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ELECTIVES								
<u> </u>	UNIVERSITY	SEM/YR	DEPT	COURSE	COURSE TITLE	SEM. HRS	GRADE	
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H								
	L			1				
TOTAL HOURS: 30								
1								
Student's Signature:								
Plan of Work approved and recommended by: Advisor's Signature								
Pla	n of Work appro	ved and recomr	nended by	:	A1: 2 G: 4			
					Advisor's Signature			
To be completed by COE Academic Services Office								
Checked by:						·•		
СО	MPLETION DA	TE:						
(Stı	MPLETION DA Ident has six yea	rs from admissi	on to the r	program to	complete)			