GRADUATE APPROVED PROGRAM PLAN COLLEGE OF EDUCATION CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO

Master of Arts in Education Classification Date: Career and Technical Education Option Bulletin Year Held: Student ID # _____ Name Date Home Phone # () Address: Zip_____ Bus. Phone # ()____ Email Address: Baccalaureate Degree From: _____ Year: Graduate Writing Requirement: ECTS 5560 – Research in Career and Technical Education Quarter/Year: _____ Grade: ____ Date Petition Approved: The Student WILL demonstrate proficiency: The Student HAS demonstrated proficiency: XX List the grades and dates of units you have completed to date and the dates you plan to complete all required classes. Transfer/University Course Number Units Grade Semeste Date Grade r Year Course # College of Education M.A. CORE (18 Units) ECTS 5080 or 6080 3.0 ECTS 5190 or 6190 3.0 ECTS 6350 3.0 ECTS 6370 3.0 ECTS 6380 3.0 ECTS 6390 3.0 **CAREER AND TECHNICAL EDUCATION ELECTIVES (15) Units** 3.0 3.0 3.0 3.0 3.0 ECTS 6980 0.0

NOTE: 33 Units required for completion of degree

SIGNATURES:

Advisor: _____

Date:

Program Coordinator:

Date: _____

1) ADMISSIONS 2) CANDIDATE 3) FILE 4) ADVISOR

2019-2020 Bulletin and Amendment per Coordinator

NOTE: SEE REVERSE SIDE FOR JUSTIFICATION STATEMENT