

**TTU - M.A. – LEARNING DESIGN AND TECHNOLOGY
PROPOSED PROGRAM OF STUDY**

T # _____

Major: Learning Design and Technology

Name: _____

	Course Subject	Course Number	Course Description	Where Taken	Term Completed	Sem. Hrs. Credit	Grade
BACKGROUND COURSES CREDIT NOT COUNTED TOWARD DEGREE							
TRANSFER CREDIT							
COURSES TAKEN OR TO BE TAKEN AT TTU TO COUNT TOWARD DEGREE	CSED	6000	*Digital Literacy and Computing	TTU		3	
	CSED	6010	*Programming Fundamentals & Computational Thinking for Educators	TTU		3	
	CSED OR CUED	6020 OR 7520	*Computer Science Concepts & Design OR Teaching and Learning Online	TTU		3	
	CSED OR CUED	6030 OR 6440	*Computer Science Instructional Methods OR Emerging Technologies in Education	TTU		3	
	CUED	6430	**Design Studio: Production of Instructional Materials	TTU		3	
	CUED	6450	**Immersive Technologies for Teaching & Learning	TTU		3	
	CUED	7510	**Instructional Design Foundations	TTU		3	
	CUED	7540	**Applied Instructional Design & Learning Analytics	TTU		3	
	FOED	6820	Applied Educational Assessment	TTU		3	
			Select Certificate Pursuing Below.				
	Select:		*Completion of courses grants a <i>Computer Science Education certificate</i>	TTU			
	Select:		**Completion of courses grants an <i>Instructional Design & Virtual Teaching</i>	TTU			
			TECHNOLOGY FOCUSED RESEARCH				
	CUED	6300 or 6310	Quantitative Educational Research or Qualitative Research in Education	TTU		3	
CUED	6305 or 6315	Quantitative Problems in Curriculum or Qualitative Problems in Curriculum	TTU		3		
Total Semester Hours Credit to be Counted Toward Degree						33	
						FINAL GPA	

Do you anticipate using Human Subjects in your research? YES _____ NO _____
If yes, IRB approval is required one semester prior to graduation. Contact your advisor for more information.

Total semester hours including thesis:
 7000 level _____ 6000 level _____ 5000 level _____ (no more than 9hrs at 5000 level) 6 years expires end of _____ (term) _____ (year)

APPROVED ADVISORY COMMITTEE:

_____ Chairperson _____ Date	_____ Departmental Chairperson _____ Date
_____ Member _____ Date	_____ Dean of College _____ Date
_____ Member _____ Date	_____ College of Graduate Studies Designee _____ Date
_____ Member _____ Date	

ALL SIGNATURES VERIFY APPROVAL OF TOTAL FORM

NOTICE:

- A graduate student shall be enrolled for at least one course appropriate to the degree objective during the term in which the degree is awarded.**
- Application for graduation must be submitted by deadline published in catalog and the online Academic Calendar.**



APPOINTMENT OF ADVISORY COMMITTEE Admission to Candidacy Application

This form is to be submitted to the College of Graduate Studies within two semesters of admission.

Student's Name _____ T# _____

Degree Level M.A. Major Learning Design & Technology

Concentration _____ Licensure _____

I hereby request that the following members of the Graduate Faculty be appointed to serve on my Graduate Advisory Committee:

Graduate Advisory Committee Members (Signature/Printed name)

_____ Committee Chair _____

_____ Co-chair/Member _____

_____ Member _____

_____ Member _____

_____ Member (Optional) _____

_____ Member (Optional) _____

_____ Member (Optional) _____

Student's Signature _____ Date _____

Approved _____ Date _____
Department Chairperson

Approved _____ Date _____
College Dean/Program Director