

**TTU - M.A. - CURRICULUM & INSTRUCTION  
PROPOSED PROGRAM OF STUDY**

T # \_\_\_\_\_

**Major:** Curriculum & Instruction

Name: \_\_\_\_\_

**Concentration:** Applied Behavior Analysis

	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	EDUB	6000	Conceptual Topics and Principles in Behavior Analysis	TTU		3	
	EDUB	6030	Assessment in Behavior Analysis	TTU		3	
	EDUB	6020	Behavior Change Procedures and Systems Supports in ABA	TTU		3	
	EDUB	6320	Research Methods in Behavior Analysis	TTU		3	
	EDUB	6010	Topics in Behavior Analysis	TTU		3	
	EDUB	6060	Ethics in ABA	TTU		3	
	EDUB	6050	ABA Approaches in Developmental Disabilities	TTU		3	
	FOED	6820	Applied Educational Assessment	TTU		3	
			<b>RESEARCH COMPONENT</b>				
	CUED	6300	Quantitative Educational Research	TTU		3	
	CUED	6305	Quantitative Problems in Curriculum	TTU		3	
			<b>3 Hours Advisor Guided Electives</b>				
				TTU			
				TTU			
			TTU				
<b>Total Semester Hours Credit to be Counted Toward Degree</b>						<b>33</b>	
<b>FINAL GPA</b>							
<b>Do you anticipate using Human Subjects in your research? YES _____ NO _____</b> <b>If yes, IRB approval is required one semester prior to graduation. Contact your advisor for more information.</b>							

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  
 \_\_\_\_\_ Member \_\_\_\_\_ Date  
 \_\_\_\_\_ Member \_\_\_\_\_ Date  
 \_\_\_\_\_ Member \_\_\_\_\_ Date

\_\_\_\_\_ Departmental Chairperson \_\_\_\_\_ Date  
 \_\_\_\_\_ Dean of College \_\_\_\_\_ Date  
 \_\_\_\_\_ College of Graduate Studies Designee \_\_\_\_\_ Date

**ALL SIGNATURES VERIFY APPROVAL OF TOTAL FORM**

**NOTICE:**

1. 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.
2. 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   Curriculum & Instruction  

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