

Master of Education in Visual Impairments (grades PK-12) Program Sheet

Name:

Advisor:

Student ID:

Second Reader:

Content Area:

Requirement	Course Completed	Grade	SM/YR	Cr. Hrs.
1. Introduction to Exceptional Children	ESSPED 5650		SU or prerequisite	3
2. Reading Foundations	EDUTL 5468		SU or prerequisite	3
3. Understanding Phonics and its Role in Instruction	EDUTL 5469		SU or prerequisite	3
4. Teaching Reading Across the Curriculum OR Reading Instruction for Children with Disabilities or Severe Reading Deficits	EDUTL 5442 or ESSPED 5738		SU or prerequisite	3
5. Reading and Writing Braille	EDUTL 5506 ^{L*}		AU	3
6. Visual Process	EDUTL 5507 ^{L*}		AU	3
7. Educational Assessment of Students with Mild/Moderate Disabilities OR Educational Assessment in Early Childhood Special Education	ESSPED 5743* OR 5760*		AU	3
8. Mathematics Methods	EDUTL 5108*, 5270*, or 7701*		AU	3
9. Professional Development	EDUTL 6530 ^{L*}		SP	3
10. Curriculum & Instruction for Children with Sensory	EDUTL 5525 ^{L*}		SP	3
11. Classroom Based Inquiry	EDUTL 6052*		SP	3
12. Planned Field Experience	EDUTL 5189*		SP	2
13. Reflective Seminar	EDUTL 5195		SP	1
14. Modes of Communication	EDUTL 5508 ^{L*}		SU	1
15. Orientation and Mobility	ESSPED 5510 ^{L*}		SU	2
16. Equity and Diversity in Education	EDUTL 5005*		SU	3
17. Science Methods	EDUTL 5129*, 5275*, or 7702*		AU	3
18. Planned Field Experience	EDUTL 5189*		AU	2
19. Reflective Seminar	EDUTL 5195		AU	1
20. Supervised Student Teaching	EDUTL 5191 ^{**}		SP	8
21. Reflective Seminar	EDUTL 5195		SP	1
				57

*Minimum grade requirement B-

** Minimum grade requirement B

L Courses fulfill the Visual Impairment License requirement

Continued on page 2...

I have reviewed this document and understand that all courses listed above. I also understand that all coursework above, prerequisite content coursework (typically completed prior to admission to M.Ed.), and Ohio Assessment for Educator Exams must be successfully completed prior to The Ohio State University recommendation is sent for my Ohio Teaching License.

Student Signature	
--------------------------	--

OFFICE USE ONLY

Semester/ Year of Graduation:

OAS Licensure Clearance:

<i>Initial License:</i>	
<i>GSS Signature:</i>	(___ / ___ / ___)