

Note:
 1. Type in triplicate
 2. Sign and Date
 3. Submit to GES

Graduate Evaluation
 California State University, Northridge
 Department of Secondary Education
Program for the Master of Arts Degree in Education

Student ID# _____

Name _____ Phone (Home) _____ (Work) _____

Address _____ City _____ Zip _____

Graduate GPA _____ CSUN Email Address _____

Requirements to be met for the degree

Course No.	Course Title	Units	Grade	Date	Transfer
I. Department Core Courses (9 units)					
SED 600	Research in Secondary Education	3			
SED 610	Issues in Secondary Education	3			
SED 690	Sem in Secondary Education	3			

II. Program Option (12 units)- Name of Option:					

III. Electives (6 units)					

IV. Culminating Experience (3 units)					
		3			

Total Units Required _____ (Minimum 30 units) GPA _____

Check required:
 () Comprehensive: Passed _____ Failed _____
 () Thesis/Project: Approved _____

Signatures
 Student _____ Date _____
 Graduate Advisor _____ Date _____
 Department Chair _____ Date _____
Approved _____ **Date** _____

Graduate Evaluation Services

For GES Use Only		
	By	Date
Rec'd GES		
Classified		
Notified		
Grad Check		
Degree		