Revised August 2005

FALL ADMISSION

INDIANA UNIVERSITY SOUTH BEND

ADDITIONAL LICENSE IN MILD INTERVENTIONS
EARLY ADOLESCENT/YOUNG ADULT
For students already licensed in a specific EA/YA content area

STUDENT'S NAME: _____ DATE: _____

ADDRESS: _____
Street City State Zip

FIRST YEAR			Credit Hours	Planned Enrollment Date	Date Completed	Grade
Fall	P519	Psycho-Educational Assmt. of Exceptional Children	3			
	K505	Introduction to Special Education for Grad Students	3			
Spring	P516	Adolescent Behavior and Development	3			
	P510	Psychology in Teaching	3			
	K525	Survey of Mild Handicaps (P: K505, P519)				
		File Application for K588				
Summer	S503	Secondary School Curriculum **OR**	3			
	S530	Junior High/Middle School Curriculum				
	H520	Education and Social Issues	3			
	K501	Adapting Computers for the Handicapped	3			

SECOND YEAR						
Fall	K543	Education of the Socially & Emotionally Disturbed I (P: K505, K525, P519)	3			
	K565*	Collaboration and Service Delivery	3			
	K524*	Exceptional Learner in the Secondary School				
Spring	K553*	Classroom Management and Behavior Support	3			
	K588*	Supervised Teaching in Special Education	3			

***Designated Checkpoint Courses**				

Date Admitted to Program: _____ **TOTAL:** _____ **GPA:** _____

Date of original conference: _____

Advisor: _____

Student: _____

Subsequent Advising Sessions:

Date	Advisor