

**Stockton University**  
**School of Education**  
**Master of Arts in Education (MAED)**  
**Special Education with Learning Disabilities Teacher/Consultant**  
**Endorsement**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Z# \_\_\_\_\_

Preceptor \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

Matriculation Date \_\_\_\_\_

<b>SPED Content Courses</b>		
Course	Cr.	Semester Taken
EDUC 5320 Survey/Moderate & Severe Disabilities	3	
EDUC 5321 Education and Community Resources	3	
EDUC 5330 Survey of Mild Learning Disabilities	3	
EDUC 5331 Behavior Management & Behavior Disorders	3	
EDUC 5335 Developmental Reading Instruction	3	
<b>Total Credits</b>	<b>15</b>	
EDUC 5336 Curriculum Adaptations	3	
EDUC 5337 Curriculum Based Assessment	3	
<b>Total Credits</b>	<b>6</b>	
<b>Research Courses</b>		
EDUC 5910 Educational Research	3	
EDUC 5920 Capstone Project	3	
<b>Total Credits</b>	<b>6</b>	
<b>LDTC Courses</b>		
EDUC 5338 Neurophysiological Basis for Learning Theory	3	
EDUC 5339 Collaborative Practice and Inclusion	3	
EDUC 6340 Assessment and Correction	4	
EDUC 6941 LDT/C Practicum	1	
<b>Total Credits</b>	<b>38</b>	