

Departmental Request For Candidacy and Graduate Degree Program



Please Type only.

Last Name

First Name, M.I.

Student ID

Home Street Address

City, State, Zip Code

Home Phone

Daytime Phone

Email Address

Prerequisites/Comments

Faculty Advisor Signature

Date

Dept Graduate Advisor Signature

Date

Approved for University
Graduate Committee

Associate Academic Vice President
Graduate Studies and Research

Date

Date	Plan <input type="checkbox"/> Thesis <input type="checkbox"/> Project <input type="checkbox"/> Comp Exam			
MA	Competency in Written English: <input type="checkbox"/> EDSP 221 <input type="checkbox"/> EDSP 258			
	Previous College Degree			
Degree Major: Education	Institution:			
	Degree:			
Concentration: Speech Pathology	Date:			
Proposed Graduate Degree Program				
A Courses within the Department				
DEPT	No. and Title	Sem Units	Grade	Sem Comp
EDSP	221 Research Methods	3		
EDSP	222 Navigating Oral & Written Communication	3		
EDSP	250 Seminar in Voice Disorders	3		
EDSP	251 Seminar in Phonology	3		
EDSP	254 Seminar in Neurological Disorders	3		
EDSP	255 Seminar in Motor Speech Disorders	3		
EDSP	258 Seminar in Fluency Disorders	3		
EDSP	259 Sem in Language Disorders in Children	3		
EDSP	262 Speech/Lang in Cross-Cultural Society	3		
EDSP	265 Traumatic Brain Injury	3		
EDSP	296 Seminar in AAC	3		
B Required Courses				
Dept	No. and Title	Sem Units	Grade	Sem Comp
	<input type="checkbox"/> Stats			
	<input type="checkbox"/> Child Development OR <input type="checkbox"/> Psych 102			
C Additional CDS Course				
Dept	Course	Title	Sem Units	Grade
EDSP	260		3	
Total Units: A: _____ B: _____ C: _____ Total: 30				
Clinical Requirements				
Practica	Units/Grade/Sem	Indiv. Study	Units	Sem Passed
EDSP 277	3/ /	Comps Project Thesis Oral Pres.		
EDSP 277	3/ /			
EDSP 277	3/ /			
EDSP 276	3/ /			
EDAU 277	3/ /			
EDSP 269	10/ /			
EDSP 278	6 or 10/ /	<i>Anticipated Date of Graduation</i>		
Candidacy for the Degree—Office Use Only				
Graduate/SJSU	Date	Sem. Units	GPA	Total
		30		