

**College of Education
University of Arkansas at Little Rock
Gifted and Talented Education**

Name: _____ ID: _____

MEd degree

Address: _____

City: _____ State: _____ Zip: _____

Telephone Numbers: _____ (home) _____ (work)

Email: _____

Date admitted: _____ Admission status: _____

Requirements for the degree include a minimum of _____ hours plus: _____ Comprehensive Examination

Students must satisfy graduation requirements stated in the GATE section of the Graduate Catalog and additional program requirements found under the College of Education section. The University reserves the right to modify the policies and programs of study by supplying students with written notice of change.

College of Education Requirements (9-15 hours)

AREA

LEVEL I

LEVEL II

- I. Research _____ EDFN 7303 Intro to Research
 _____ EDFN 7320 Advanced Ed. Psych
 or
 II. Learning Theories _____ EDFN 7313 Theories of Learning
 (total 3 hours)
- III. Assessment & Evaluation _____ EDFN 7171 Measurement Process
 (total 3 hours) _____ EDFN 7173 Assessment Instruments
 _____ EDFN 7174 Assessment Practicum
- IV. History & Philosophy _____ EDFN 7307 History and Philosophy
 of Education
- V. Instructional Technology _____ LSTE 7302 Instructional Technology

_____ GATE 7356 Current Issues in Research on Giftedness

Infused in GATE Core:

- _____ LSTE 7305 Microcomputer Applications
- _____ TCED 5300 Teaching with Internet
 (MATH/SCI/LA/SS)
- _____ GATE 7356 Current Issues in Research on Giftedness
- _____ GATE 7393 Special Topics _____
- _____ GATE 7361 Advanced Placement Talented Youth
- _____ GATE 7362 Administrative & Legal Issues in Gifted Ed
- _____ GATE 7363 Affective Needs of Gifted and Talented

Gifted and Talented Requirements (18 hours)

- _____ GATE 7350 Teaching the G/T _____ GATE 7395 Internship
- _____ GATE 7390 Supervised Practicum _____ GATE 7355 Creativity
 Seminar
- _____ GATE 7357 Curriculum & Instruction in Gifted
 Education

Electives (3-9 hours)

_____

_____ (GATE 7393 Thesis optional)

Student _____ Date _____

Program Advisor _____ Date _____

Associate dean _____ Date _____

*required course for licensure