

## PROGRAM of STUDY

Please type all required information. Do not handwrite. List courses in the order they were/will be completed. Each course, directed reading, independent study, etc. should be listed on a separate line. Include only those courses that will be applied to the degree.

**MASTER of EDUCATION**

M550/Q206

**MAJOR:** Instructional Psychology & Technology

**CONCENTRATION:** Educational Psychology

**NAME:** \_\_\_\_\_

**OU ID:** \_\_\_\_\_

COURSE PREFIX & NUMBER	COURSE NAME	HOURS	GRADE	SEMESTER & YEAR	CREDIT*
* For OU graduate courses including Norman, Tulsa, Advanced Programs and Liberal Studies, leave this column blank. For transfer credit (including OU Health Sciences Center courses), enter the institution name in this column. For courses applied to a dual master's degree, enter <b>Shared</b> in this column.					

### REQUIRED COURSES

EIPT 6143	Instructional Development	3			
EIPT 5033	Introduction to Research and Evaluation in Education	3			
EIPT 5203	Assessment and Evaluation in Education and Counseling	3			
EIPT 5023	Analysis of Quantitative Data I	3			
EIPT 5533	Introduction to Instructional Technology	3			
EIPT 5183	Motivation and Learning in the Classroom	3			

**ELECTIVES:** 12 hours for thesis students, 18 hours for non-thesis students. With advisor approval, select from the following EIPT courses: 6153, 6183, 6213, 6023, 6043, 6203, 6503, 6163, 6423, 6313, 6343, 6523. Other courses may be used with Graduate Liaison approval.


**THESIS RESEARCH:** 6 hours EIPT 5980 required for thesis students. A completed [Master's Thesis Topic and Committee Membership form](#) must be attached.


**TOTAL HOURS:**

30 hours required for thesis degree  
36 hours required for non-thesis degree

I intend to take the non-thesis examination in the \_\_\_\_\_ semester and graduate in the \_\_\_\_\_ semester. I hereby request approval of my program of study as outlined above. I understand that I am responsible for reviewing the policies and procedures governing graduate study at the University of Oklahoma as published in the *Graduate College Bulletin*.

☐ No ☐ Yes

I am also enrolled as a doctoral student, and I wish to receive the non-thesis master's degree on the basis of my doctoral general examination, which I will take in the \_\_\_\_\_ semester.



Student Signature

Date

I have reviewed the above-named student's proposed program of study and I recommend approval.

Printed Name of Graduate Liaison

Graduate Liaison Signature

Date

### FOR GRADUATE COLLEGE USE ONLY:

Program effective **Summer 2017**. Semester Admitted/Re-admitted: \_\_\_\_\_

Date Checked: \_\_\_\_/\_\_\_\_/\_\_\_\_ | Timeline Begins: \_\_\_\_ | Hours Required: \_\_\_\_ | **OK** \_\_\_\_ **Problem** \_\_\_\_