

**Lincoln Memorial University**  
**Master of Education in Initial Teacher Licensure**  
**Program of Study – Physics 6-12**

**Student Name:** \_\_\_\_\_ **ID#:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Undergraduate coursework must have a grade of C or better to count toward Major Core.*

Calculus I	_____
Calculus II	_____
Calculus III	_____
Calculus-based Physics	_____
Differential Equations	_____
Modern Physics	_____
Mechanics	_____
Quantum Mechanics	_____
Thermal Physics	_____
Modern Optics	_____
Electricity and Magnetism	_____
Total Hours:	36 (or higher)

**Professional Education Core**

EDUC 570 Introduction to Teaching/Learning (6 hours)	_____
EDUC 571 Extending/Refining Knowledge of Teaching/Learning (6 hours)	_____
EDUC 580 Methods of Teaching in Secondary Environments (3 hours)	_____
EDUC 509 Content Literacy (3 hours)	_____
EDUC 591 Enhanced Student Teaching Experience (6 hours)	_____

*\*All program requirements, including deficiency coursework and PRAXIS® exams must be passed before applying for EDUC 591\**

**Total MEDITL hours to be recommended for licensure: 24**

**Master of Education Electives**

EDUC 501 Foundations of American Education (3 hours)	_____
EDUC 511 Research and Statistics (3 hours)	_____
CI 501 Curriculum, Instruction, and Assessment (3 hours)	_____
EDUC 572 Child Development (3 hours)	_____
<i>Complete 6 hours from the following courses:</i>	
CI 516 Motivational Theory/Environment (3 hours)	_____
CI 512 Educational Practice and Innovation (3 hours)	_____
EDUC 592 Equity Issues in Education <b>OR</b> *IL 541 School/Community Partnerships (3 hours)	_____

*\*Or similar course(s) approved by Program Director*

**Total Number of Master of Education Elective hours: 18**

**Total MEDTL hours for Master degree PLUS recommendation for licensure: 42**

- **Successful completion of edTPA Portfolio**
- **Required PRAXIS® Exam: Physics: Content Knowledge (5265)**

Transcript Analysis continued

Name \_\_\_\_\_

ID# \_\_\_\_\_

Area of Certification \_\_\_\_\_

GPA \_\_\_\_\_

Test Requirement \_\_\_\_\_

Campus \_\_\_\_\_

Beginning Semester \_\_\_\_\_

Degree/Institution/Date
_____
_____
_____
_____
_____

Deficiency Coursework/Conditions/Comments
_____
_____
_____
_____
_____

TOTAL REQUIRED HOURS FOR INITIAL TEACHER LICENSURE \_\_\_\_\_

TOTAL REQUIRED HOURS FOR MASTER OF EDUCATION DEGREE \_\_\_\_\_

By signing this document, I agree that I understand I must complete the above requirements in order to apply for EDUC 591/student teaching.

\_\_\_\_\_  
Student Signature Date

\_\_\_\_\_  
Director Signature Date