

Hunter College of the City University of New York - Office of the Registrar
DEGREE AUDIT APPLICATION FORM (DAAF) Attachment BA/MA in Adolescent Education: Mathematics (461)

LIBERAL ARTS AND SCIENCE REQUIREMENTS: Many of these courses will meet the General Education Requirements as well.

Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
ENG 120	Expository Writing	3	Fall Spring Summer	
ENG 220	Introduction to Literature	3	Fall Spring Summer	
STAT 213	Introduction to Applied Statistics	3	Fall Spring Summer	

List 2 courses selected from: HIST 151, HIST 152 and GEOG 101

			Fall Spring Summer	
			Fall Spring Summer	

List one science course with a lab component

			Fall Spring Summer	
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List 12 credits of foreign language (please note if exempted by College on the basis of equivalency)

			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	

List 6 credits from the arts (does not include courses in FILMP, MEDP and MEDIA)

			Fall Spring Summer	
			Fall Spring Summer	

Pedagogical Requirements

Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
SEDF 203	Social Foundations of Education: Grades 7-12	3	Fall Spring Summer	
SEDF 204	Adolescent Development	2	Fall Spring Summer	
SEDF 205	Educational Psychology: Applications in Grades 7-12	2	Fall Spring Summer	
SEDF 206	Assessment of the Teaching and Learning Process in Grs 7-12	2	Fall Spring Summer	
SEDC 210	Building the Foundations of Literacy in Grades 7-12	3	Fall Spring Summer	
SEDC 220	Adolescent Health and Safety	1	Fall Spring Summer	
SEDC 713	Methods I: Advanced Study of Secondary Learning Environments for Teaching Mathematics and Science	3	Fall Spring Summer	
SEDC 723	Methods II: Intensive Study of Teaching Diverse Learners in Mathematics. Grades 7-12	2	Fall Spring Summer	
SEDC 753	Student Teaching in Mathematics, Grades 7-12	5	Fall Spring Summer	
SPED 708*	Teaching Students with Special Needs in Inclusive Settings	3	Fall Spring Summer	

* Required for students who matriculated into the adolescent education program on or after fall 2011.

I certify that the student mentioned herein, upon successful completion of the courses listed above, will have satisfied the departmental requirements.

Office of Educational Services (Rm 1000W) Signature	Date
OES Name (Please Print)	
E-mail address	

OES Stamp

Student's Signature _____ **Date** _____

Email Address _____

Submit this form with the GER DAAF