

Campbellsville
UNIVERSITY 
School of Education
Empowerment for Learning

CURRICULUM GUIDE

8-12 Bachelor of Science in Social Studies 05/03/2018

Name _____ Advisor _____ Ethnicity _____
 Gender: M F Address _____
 ID# _____ Telephone Number _____
 E-Mail Address _____ Semester/Year admitted (SOE) _____
 CAP I _____ CAP 2/Praxis (CASE) _____ CAP 3/Portfolio _____ CAP 4/Portfolio _____
 PRAXIS Subj. Assess. SS Content/Inter. (5086) _____ (153 passing) Date Taken _____
 PRAXIS Subj. Assess. PLT Exam (5624) _____ (160 passing) Date Taken _____

Praxis Disclaimer: Kentucky educator certification requirements are subject to change. Before registering for the test(s), please check the Education Professional Standards Board website at www.epsb.ky.gov for current test requirements and current cut scores. You may also contact 502-564-4606 or toll free at 888-598-7667.

Reminders: A minimum overall GPA of 2.75 is required for admission to and continuation in the educator preparation program. A C or better is required in all courses on curriculum guide. A CAP 4 portfolio of satisfactory evidence for all KTPS/InTASC standards is required for program exit at CAP 4. For a complete listing of all program requirements, please see the appropriate CAP guide.

Professional Courses																																																																																			
33 Hours																																																																																			
<p>Foundation Coursework: 12 hrs</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Sem/Year</th> <th style="text-align: left;">Grade</th> <th></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>ED 199 Entry to Teacher Preparation (0)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 220 Introduction to Teaching (3)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 300 Human Dev. & Learn. Theory(3)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 310 Instructional Technology(3)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 325 Teaching Diverse Learners(3)</td> </tr> </tbody> </table>	Sem/Year	Grade		_____	_____	ED 199 Entry to Teacher Preparation (0)	_____	_____	ED 220 Introduction to Teaching (3)	_____	_____	ED 300 Human Dev. & Learn. Theory(3)	_____	_____	ED 310 Instructional Technology(3)	_____	_____	ED 325 Teaching Diverse Learners(3)	<p>Pedagogy Coursework: 9 hours</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Sem/Year</th> <th style="text-align: left;">Grade</th> <th></th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>ED 359 Content Literacy (3)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 390 Assessment & Instructional Strategies(3)</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>ED 414 Classroom Management (3)</td> </tr> </tbody> </table> <p>Clinical Practice: 12 hours</p> <table style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td>_____</td> <td>_____</td> <td>ED 450 Student Teaching (12)</td> </tr> </tbody> </table>	Sem/Year	Grade		_____	_____	ED 359 Content Literacy (3)	_____	_____	ED 390 Assessment & Instructional Strategies(3)	_____	_____	ED 414 Classroom Management (3)	_____	_____	ED 450 Student Teaching (12)																																																	
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My signature below indicates I hereby recognize it is my responsibility to review and ensure I complete the above requirements for successful continuation in and exit from the Teacher Education Program.

Student Signature

Date

Advisor Signature

Date