

Campbellsville University
School of Education
Environmental Education Endorsement, P-12
Graduate Level

Name _____ Advisor _____ Ethnicity _____

Gender: M F E-Mail _____

Address _____

SSN# _____ Telephone Number _____

Address _____

Degree:

B.A./B.S. _____ Institution _____ Date _____

Major _____ Minor _____

Grade Level _____

***Currently there is no Praxis II examination for this endorsement.**

I. Environmental Education Courses 12 Hours																		
a. Environmental Courses (Must be taken in sequence):																		
<table style="width: 100%;"><tr><td style="width: 15%;">Sem/Year</td><td style="width: 15%;">Grade</td><td></td></tr><tr><td>_____</td><td>_____</td><td>ED/ENV 540 Foundations of Environmental Education (3)</td></tr><tr><td>_____</td><td>_____</td><td>ED/ENV 542 Environmental Education Instruction and Materials</td></tr><tr><td>_____</td><td>_____</td><td>ENV 584 Environmental Ethics and Contemporary Environmental Issues (3)</td></tr><tr><td>_____</td><td>_____</td><td>ENV 516 Stream Ecology for Teachers (3)</td></tr><tr><td colspan="3" style="text-align: right;">Total: 12 Hours</td></tr></table>	Sem/Year	Grade		_____	_____	ED/ENV 540 Foundations of Environmental Education (3)	_____	_____	ED/ENV 542 Environmental Education Instruction and Materials	_____	_____	ENV 584 Environmental Ethics and Contemporary Environmental Issues (3)	_____	_____	ENV 516 Stream Ecology for Teachers (3)	Total: 12 Hours		
Sem/Year	Grade																	
_____	_____	ED/ENV 540 Foundations of Environmental Education (3)																
_____	_____	ED/ENV 542 Environmental Education Instruction and Materials																
_____	_____	ENV 584 Environmental Ethics and Contemporary Environmental Issues (3)																
_____	_____	ENV 516 Stream Ecology for Teachers (3)																
Total: 12 Hours																		

Continuous Assessment:

CAP 5: Admission to the Program: _____ Date of Approval _____

(Admission to the Graduate Program, 3 recommendations,
GPA 2.75, certificate; KY Code of Ethics)

CAP 6: Continuation in the program at mid-point: _____ Date of Approval _____

(Includes GPA 3.0; disposition recommendations, KY code
of Ethics)

CAP 7: Exit from the program: _____ Date of Approval _____

(Includes GPA 3.0; disposition recommendations; exit
interview)

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