



CERTIFICATE FOR INTERMEDIATE ADMINISTRATION  
AND SUPERVISION (Endorsement #092): PROGRAM OF STUDY

NAME: \_\_\_\_\_ STUDENT ID#: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE:(\_\_\_\_) \_\_\_\_\_ WORK PHONE:(\_\_\_\_) \_\_\_\_\_ PREFERRED E-MAIL \_\_\_\_\_

Course No.	Name	Sem. Hr.
	Prerequisite: Masters Degree	3 S.H. _____
	Institution	
	Prerequisite: 5 Years of Full-time teaching	3 S.H. _____
	Prerequisite: Special Education	3 S.H. _____
Course No. From transcript	Course Name Institution	Grade
ED 660	Internship and Seminar in Educational Leadership: Theory, Research, and Practice I	3 S.H. _____
ED 665	Internship and Seminar in Educational Leadership: Theory, Research, and Practice II	3 S.H. _____
ED 800	Foundations of Instructional Leadership	3 S.H. _____
ED 804	Learning, Cognition, and Teaching	3 S.H. _____
ED 805	Program Administration and Assessment	3 S.H. _____
ED 820	Topics in Curriculum and Instruction	3 S.H. _____
CCSU EDL 618	Understanding the Political and Ethical Environment of School Leadership	3 S.H. _____
CCSU EDLL 656	Leadership and Supervision in Teaching and Learning	3 S.H. _____
Course No. From transcript	Course Name Institution	Grade
		3 S.H. _____
Course No. From transcript	Course Name Institution	Grade
		3 S.H. _____
Course No. From transcript	Course Name Institution	Grade

TOTAL: Minimum 22 S.H. \_\_\_\_\_

*Changes in this schedule can be made only with the Doctoral Program Coordinator's approval. The admission requirements have been explained to me and I understand it is my obligation to read the Graduate Catalog and other documents supplied by the Program Coordinator.*

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Coordinator's Signature \_\_\_\_\_ Date: \_\_\_\_\_