

UNIVERSITY OF MINNESOTA

Master of Education (M.Ed.) in Applied Kinesiology: Developmental Adapted Physical Education (DAPE)

Student ID _____ Date _____

Name (Last, First, Maiden, Middle) _____

Local Address _____
 Street City State Zip

Phone _____ Adviser _____

Date Initiated M.Ed. courses _____ Major: Applied Kinesiology: DAPE

REQUIRED COURSES

Prefix	Course No.	Course Title	Credit	Grade	Sem	Year	**Trans
KIN	5103	Development Adapted Physical Ed	3				
KIN	5104	Physical Activities for Persons w/Disabilities	3				
KIN	5196	Practicum: Developmental Adapted Physical Education	4				
KIN	4981*	Understanding Kinesiology Research	3*				
KIN	5981*	Research Methodology in Kinesiology	3*				
KIN	5995	Research Problems	3				
EPSY	5613	Foundations of Special Education I	3				
EPSY	5614	Foundations of Special Education II	3				
EPSY	5616	Behavioral Analysis & Classroom Mgmt	3				

*Students may use either 4981 or 5981 to fulfill requirement. **Indicate X if transferred and list below:

****Transferred Required Courses:**

University	Course No.	Course Title	Credit	Grade	Sem	Year

Upon approval of Academic Advisor, graduate-level courses may be transferred from outside the University of Minnesota.
Sub-total =Number of Required Credits = _____

ELECTIVE COURSES **Indicate X if transferred and list below:

Prefix	Course No.	Course Title	Credit	Grade	Sem	Year	**Trans

****Transferred Elective Courses:**

University	Course No.	Course Title	Credit	Grade	Sem	Year

Upon approval of Academic Advisor, graduate-level courses may be transferred from outside the University of Minnesota.
Sub-total of Number of Elective Credits = _____

Total Number of Required & Elective Credits (must equal 30)= _____

Approved by:
 Academic Adviser _____ Date _____

M.Ed. DAPE Coordinator _____ Date _____