

PLAN OF WORK
EXPERIMENTAL SCHOOL LIBRARY MEDIA ENDORSEMENT
 [THIS DOCUMENT IS AN INTEGRAL COMPONENT OF YOUR CAREER PLAN]

Name: _____ Student Number (e.g. 000 +): _____
 Last First Maiden or Middle
 Home Address: _____ Telephone: _____
 City: _____ State: _____ Zip Code _____
 Country (if not U.S.) _____ WSU Access ID #: _____
 Term/Year of First SIS Class taken: _____ Teaching Certificate Number: _____

Instructions for completing this form

- Fill in all information requested above.
- For each course indicate the semester and year (**Sm/Yr**) you plan to take the course. In this document courses are organized to aid in completing pre-requisites appropriately.
- Fill in the “Grade” column only if you have completed a course and the grade has been posted.
- Sign your name on page 2 and take the form to your advisor for review.

COURSES

1. Required Classes

Schl	Sm/Yr	Dept	Course	Course Title	Cr	Grade
WSU		INF	7310	School Library Media Programs	3	
WSU		INF	7320	The Media Specialist as Teacher and Instructional Consultant	3	
WSU		INF	7980	Practicum: SLM***	2-3	

2. Choose ONE literature course

Schl	Sm/Yr	Dept	Course	Course Title	Cr	Grade
WSU		INF	6520	Beyond Books: Youth Literature in Action	3	
WSU		INF	6530	Young Adult Literature	3	

3. Choose ONE Technology Courses

Schl	Sm/Yr	Dept	Course	Course Title	Cr	Grade
WSU		INF	6420	Introduction to Web Development	3	
WSU		LDT	7130	Facilitating Digital Learning	4	
WSU		LDT	7140	Interactive Course Design	4	
WSU		LDT	7210	Emerging Tech for Digital Learning	4	
WSU		LDT	7220	Mobile Learning Technologies	4	

Total number of credit hours required _____

All requirements and course work must be completed by*: _____

*Within three years following date of first recorded semester grade to be used for the certificate

**Under no circumstances may undergraduate credits be used toward this graduate degree

*** Students who complete a 4-credit technology course may enroll for a 2-credit practicum rather than the 3-credit practicum course.

Teacher Certification: _____ Certified Teacher _____ copy in file

MTTC Library Media Test Date: _____ Passed Test _____ copy in file

Do you intend to complete the MLIS degree at a later date?

(All degree requirements must be completed within six years of the first class)

_____ Yes

_____ No

Petition for admission to candidacy for: _____

Student's Signature Date

Plan of Work approved and candidacy recommended by: _____

Advisor's Signature Date

Candidacy authorized by SIS: _____

Reviewed by Date

**STUDENTS MUST HAVE FACULTY APPROVAL FOR ANY CHANGES IN
PLAN OF WORK PRIOR TO REGISTRATION**