

Department of Administrative and Instructional Leadership



The Graduate School of Education

Name of Program: **Advanced Certificate in Gifted Education**

(Beyond Initial Certification)

AC-GTED

Number of Credits in Program: **12 Credits**

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Program Initiated: _____

(If applicable)

X Number: _____

Advisor: _____

Mentor: _____

I. Gifted Education in Graduate Level Courses: 12 Credits

EDU Number	Course Title		Semester	Date Completed (Sem./Yr./Grade)	Comments
EDU 7410	Identification of the Gifted and Talented				
EDU 7411	Introduction to Designing Programs, Curriculum and Materials for the Gifted and Talented				
EDU 7412	Teaching Creative Thinking and Problem Solving to Gifted and Talented Students				
EDU 7413	Professional Collaboration and Leadership in Gifted Education				

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

"We reserve the right to make changes to the program"

03/01/2016

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