

Department of Higher Education

Doctor of Education (EdD) Coursework Plan 2016-17

NAME _____ STUDENT # _____

Please discuss with your advisor the course plan most appropriate for your schedule. Substitutions are acceptable with advisor approval on the [course substitution form](#). Students must receive a B- or better in coursework for it to be counted toward the degree. A grade-point average of 3.0 or better must be maintained throughout the degree.

	COURSE NUMBER	QUARTER OF COMPLETION	CREDIT HOURS
I. Research Requirement (29 credits)			
<i>A. Foundations Courses (12 credits)</i>			
Structural Foundations of Research	RMS 4940		3
Introductory Statistics	RMS 4910		5
Introduction to Qualitative Research	RMS 4941		4
Subtotal			12
<i>B. Higher Education Research Courses (4 credits)</i>			
<i>Choose one of the following:</i>			
Program Evaluation and Assessment	HED 42XX		4
Educational Policy Analysis	HED 4242		4
Subtotal			4
<i>C. Doctoral Research Project Design (3 credits)</i>			
Research Processes	HED 4216		3
Subtotal			3
<i>D. Doctoral Research Credits (min 10 credits)</i>			
Students must register for at least 1 credit hour each quarter following all other coursework, until graduation.			
Doctoral Research - EdD	HED 5993	<i>Students are required to register for at least 1 credit of HED 5993 each quarter following the completion of all other coursework, until graduation.</i>	10
Subtotal			10

NAME _____

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II. HED Required Courses (24 credits; 6 courses)			
Critical Higher Education	HED 4210		4
Current Issues in Higher Education	HED 4211		4
Organization and Governance of Higher Education	HED 4220		4
The Community College	HED 4226		4
Seminar in Higher Education	HED 4294		4
Seminar in Higher Education	HED 4294		4
Subtotal			24
III. Higher Education Electives (12 credits; 3 courses)			
Subtotal			12
SUMMARY			
I. Research Requirement (min 29 credits)			
II. HED Required Courses (24 credits)			
III. Higher Education Electives (12 credits)			
Total Credit Hours for EdD			65

Student's Signature: _____

Date: _____

Advisor's Signature: _____

Date: _____