

**Hunter College of the City University of New York - Office of the Registrar**  
DEGREE AUDIT APPLICATION FORM (DAAF)  
**Master's of Science in Education Special Education**  
**Advanced Preparation in Learning Disabilities- (30 Credits)**

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Name on diploma will be printed as it appears on academic transcript (record).

ID No -- Last semester of attendance (FILL IN YEAR) Summer \_\_\_\_\_ Fall \_\_\_\_\_ Spring \_\_\_\_\_

Telephone Hm ( ) \_\_\_\_\_ Wk ( ) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

- PLEASE PRINT LEGIBLY IN **BLUE OR BLACK INK ONLY.**
- **INCOMPLETE DAAFS WILL BE RETURNED TO THE STUDENT.**
- **YOU MUST BE REGISTERED FOR THE SEMESTER IN WHICH YOU GRADUATE. IF YOU ARE NOT REGISTERED FOR ANY COURSES YOU MUST REGISTER FOR MAINTENANCE OF MATRICULATION (MAM) AT THE OASIS. THERE ARE ABSOLUTELY NO WAIVERS OF THIS REQUIREMENT. CONSULT THE OFFICE OF THE BURSAR FOR TUITION AND FEE INFORMATION.**
- **IF YOU HAVE ANY GRADES ON APPEAL, YOU MUST NOTIFY THE DEGREE AUDIT DIVISION BEFORE THE DATE OF GRADUATION.**
- **NO CHANGES TO YOUR RECORD WILL BE MADE AFTER GRADUATION HAS BEEN POSTED.**
- **IF YOUR GRADUATION IS CANCELLED, YOU MUST REAPPLY AND SUBMIT A NEW DAAF, SIGNED BY YOUR PROGRAM ADVISOR/COORDINATOR, IN THE BEGINNING OF THE SEMESTER IN WHICH YOU WILL HAVE MET DEGREE REQUIREMENTS. SEE ACADEMIC CALENDAR FOR DEADLINES.**

List All Courses Not Being Used Toward Degree

Course Prefix & Number	Course Title	Credits	Semester (Circle One)			Year Taken
			Fall	Spring	Summer	

Courses used to meet Admissions Condition(s)

Course Prefix & Number	Course Title	Credits	Semester (Circle One)			Year Taken
			Fall	Spring	Summer	

I certify that the student mentioned herein, upon successful completion of the courses listed on the reverse, will have satisfied the departmental requirements and is recommended for the degree of Master's of Science in Education.

Office of Educational Services (Rm 1000W) Signature _____ Date _____
OES Name (Please Print) _____
E-mail address _____

OES Stamp
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**THIS AUDIT IS NOT OFFICIAL UNTIL APPROVED BY THE OFFICE OF THE REGISTRAR, DEGREE AUDIT DIVISION.**

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

**Please Turn Over And Complete Specialization Section**

Course Prefix & Number	Course Title	Credits	Semester (Circle One)	Year Taken
SPED 781.51	Reading and Writing for Students with Learning Disabilities: Methods 1	3	Fall Spring Summer	
SPED 782.51	Supervised Clinical Teaching of Students with Learning Disabilities: Part 1	2	Fall Spring Summer	
SPED 783.51	Math and Organizational Skills for Students with Learning Disabilities: Methods 2	3	Fall Spring Summer	
SPED 784.51	Supervised Clinical Teaching of Students with Learning Disabilities: Part 2	2	Fall Spring Summer	
SPED 701.51	Advanced Practicum in Special Education Assessment	3	Fall Spring Summer	
SPED 707.51	Advanced Seminar in Special Education Practices	3	Fall Spring Summer	
<b>Electives – Graduate level Education courses approved by Advisor (14 Credits)</b>				
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	
			Fall Spring Summer	

**\*\*\*\*\* A SEPARATE MEMORANDUM FOR ANY LANGUAGE EXAMS, COMPREHENSIVE EXAMS, PROOF OF THESIS COMPLETION, WAIVERS, EXEMPTIONS AND/OR SUBSTITUTIONS OF REQUIRED COURSES MUST BE SUBMITTED TO THE RECORDS DIVISION, IN ROOM 217 HUNTER NORTH. \*\*\*\*\***

For Office Use Only

Credits required	35-37	Admissions Condition		GPA index (must be 3.0 or above)	
Credits in progress		Non-matric credits (under B)		Incomplete letter sent (Initials & Date)	
Thesis/Project	N/A	Condition credits		Eligible to graduate if current term completed (Initials & Date)	
Comprehensive Exam	N/A	Out of Date credits		Degree Posted (Initials & Date)	
Language Exam	N/A	Undergraduate credits		Graduation Term	
Professional Teaching Portfolio	N/A	Other credits		Graduation Date	