

ARTT 300
APPLICATION TO SPECIALIZATION
(ART EDUCATION)

Name: _____ Student ID: _____
(PRINT LEGIBLY)

Local Address: _____ Phone/Cell: _____
Email: _____

Academic Record

A copy of your transcript must be attached to this application.

1. Lower level courses required by my area of specialization are completed or are in progress. Yes No
2. Application to COE is complete or has been submitted and is in process. Yes No
3. Have an average of 2.75 or above. Yes No

4. Indicate below all courses completed, including the grade earned, or IP if currently in process. (*).

5. Indicate the semester in which you successfully completed Foundation Requirements: _____

6. If you have not successfully completed Foundation requirements, list the course(s) in question: _____

<u>Course</u>	<u>Grade</u>	<u>Course</u>	<u>Grade</u>
ARTT 112&113	_____	VCOM 261/ARTS 281	_____
ARTS 101	_____	ARTS 201	_____
ARTS 102	_____	ARTS 202	_____
ARTS 120	_____	ARTS 220	_____
ARTH 175	_____	ARTH 176	_____
EDUC 110	_____	EDUC 210	_____
EDUC 250	_____	EDUC 275	_____
ARTE 348	_____	ARTE 528	_____
ARTS 300 or above	_____	ARTS 300 or above	_____
ARTH 200 or above	_____		

(*) If any of the required courses are not completed or in progress, please explain below.

Do not write in the shaded area.

Overall GPA _____

Fine Arts GPA _____