

3. Statement of your professional objectives for the program and certification(s) if any.

I currently am employed by the Austin Fire Department (AFD). The Training Division is currently providing training to the firefighters via the Internet and the ACC Blackboard. My plan is to develop online training for the department.

4. Experiences other than formal course work necessary or desired to achieve your objectives.

I have been working with the AFD Training Division to develop Web-based training for the fire department at large. I have taken hundreds of online training hours including having completed the education for the Texas real estate license and military education.

5. Indicate the method of final examination that will document that you have achieved your professional objectives. For a final exiting examination, a capstone experience or a thesis defense, give the anticipated semester and anticipated date of completion.

	Semester/Year
Comprehensive Exam	N/A
Thesis	N/A
Capstone Course (MBA & MSPHN)	N/A
Electronic Portfolio (MED in EDTECH)	N/A

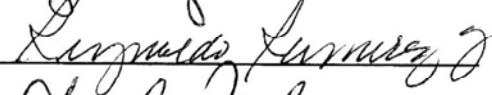
Students must complete all graduate work for a degree within seven years of the time of their first graduate course registration. Graduate courses more than seven years old will not be accepted for credit toward a degree program.

Signatures & Approvals:



Graduate Student Signature: _____ Date Feb 8, 2009

Faculty Advisor Approval:  _____ Date Feb 9, 2009

Department Chair Approval:  _____ Date 2-9-09

Graduate Office Approval:  _____ Date 3-16-09



xc: Student
Advisor
Department Chair

FEB - 9 2009

Graduate Office retains original

Graduate Studies
Champion Hall, 1st Floor, 80 Fort Brown, Brownsville, TX 78520
(956) 548-6552; utbgrad@utb.edu

Office of
Graduate Studies

COPY

Revised (6/05)

The University of Texas at Brownsville and Texas Southmost College

GRADUATE PROGRAM OF STUDY

Instructions: This Program of Study must be prepared in consultation with the graduate advisor. It must reflect the degree requirements listed in the Graduate Catalog. Any changes to the degree requirements as shown on the POS must have the written approval and justification of the graduate advisor and the Department Chair prior to submission to the Office of Graduate Studies. Information given must be complete.

The POS must be typed.

Name Hudson, Leonard E. Student ID# 0293626

Address 163 CR 1723, Clifton, TX 76634

Home Phone: 512-266-0074 Work/Cell. Phone#: 512-913-8972 Email: Leon@JLazyL.com

Degree Program: Master of Education Concentration: Educational Technology
Online

1. Transfer courses (if any).

If applicable, list the courses you are requesting to transfer (attach copy of transcript). Transfer courses must meet guidelines set forth in the Graduate Catalog.

Transfer Course	Institution	UTB Equivalent Course	Year Taken

2. Courses that have been or will be completed at UTB/TSC

If pursuing 2nd master's degree, maximum of 9 hours from first master's degree can be used toward second master's degree.

Course Prefix & Number	Course Name	Semester/Year
EDCI 6300	Introduction to Research	Spring 08
EDTC 6320	Instructional Technology	Spring 08
EDCI 6304	Learning and Cognition	Spring 09
EDTC 6351	Web-Based Multimedia in Instr	Spring 09
EDTC 6325	Educational Telecommunication	Summer 09
EDTC 6321	Instructional Design	Fall 09
EDTC 6329	Selected Topics in Ed Tech	Fall 09
EDTC 6358	Theory & Practice in E-Learning	Spring 10
EDTC 6323	Multimedia/Hypermedia	Spring 10
EDTC 6352	Plan & Design Interactive Web-Based Instr	Summer 10
EDTC 6350	Instructional Tech Consultant	Fall 10
EDTC 6332	Practicum in Ed Technology	Spring 11

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		Semester/Year
<input type="checkbox"/>	Comprehensive Exam	_____
<input type="checkbox"/>	Thesis	_____
<input type="checkbox"/>	Capstone Course (MBA & MSN)	_____
<input checked="" type="checkbox"/>	Portfolio (M.Ed. in Educational Technology)	<u>Spring 2011</u>

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Graduate Student Signature: *E. Hudson* Date Dec 10, 2008

Faculty Advisor Approval: *Cheryl Henry Pope* Date Jan 6, 2009

Department Chair Approval: *Lequanda Lewis* Date 1-7-09

Graduate Office Approval: *Charles Juby* Date 1-16-09

cc: Student
Advisor
Department Chair

Graduate Office retains original

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JAN - 7 2009

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**Office of
Graduate Studies**