

**ALBANY STATE UNIVERSITY**

COLLEGE OF EDUCATION

DEPARTMENT OF COUNSELING & EDUCATIONAL LEADERSHIP

**Tier I MASTER'S IN EDUCATIONAL ADMINISTRATION & SUPERVISION CERTIFICATION ONLY 18 sem. hrs.**  
**(Certificate can only be added to an existing master's, six or seven year certificate)**

Name \_\_\_\_\_ Ram ID \_\_\_\_\_  
 Advisor \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/ Zip \_\_\_\_\_  
 Email 1 \_\_\_\_\_ Email 2 \_\_\_\_\_

**REQUIRMENTS: 18 Semester Hours**

Dept.	Course No.	Course Name	Grade	Sem. Credit hours	Clinical clock hours	Observation clock hours
EDAS	5505	Introduction to Leadership		3	40	5 @ elementary
EDAS	5535	Ethics & Legal Aspects of Education		3	42	5 @middle
EDAS	5545	Curriculum, Instructional Leadership & School Improvement		3	42	5 @High
EDAS	5555	Preparing Educational Leaders for Equity		3	42	5 @ Elementary
EDAS	5575	Managing Human & Fiscal Resources in Schools		3	42	5 @ Middle
EDAS	5585	School Safety, School-Wide Discipline & Classroom Management		3	42	5 @ High
EDUC	5199	Orientation to Advanced Professional Education		0	0	NA

Other Requirements:

1. Established MyPSC Account	Date Completed _____
2. GACE Program Admission	Date Completed _____
3. Leadership GACE Ethics Entry Exam	Date Completed _____
4. Leadership GACE Ethics Exit Exam	Date Completed _____
5. Leadership GACE Assessment (301)	Date Completed _____
6. Certification/Upgrade Application	Date Completed _____
7. Background Check	Date Completed _____
8. Fall and Spring Orientation	Date Completed _____
9. Leadership forum(s)	Date Completed _____
10. Special Education Requirement	Date Completed _____

\_\_\_\_\_  
 CANDIDATE SIGNATURE/DATE

\_\_\_\_\_  
 ADVISOR SIGNATURE/DATE