

**MASTER OF ARTS
In Special Education
WITH
LDTC ENDORSEMENT
ELIGIBILITY**

**New Jersey City University
2039 Kennedy Boulevard
Jersey City, NJ 07305**

Master of Arts in Special Education with Learning Disabilities Teacher Consultant Endorsement Eligibility (39 credits)

This 39-credit MA in Special Education with LDTC endorsement eligibility is for teachers who are already certified to teach Special Education or an allied field in New Jersey. The program is designed for teachers with at least one year of successful teaching experience under a Certificate of Eligibility with Advanced Standing (CEAS) or Standard Certificate. A copy of the Standard certificate must be submitted to the Office of Graduate Studies for graduation clearance and to the Administrator for Certification when applying for the LDTC endorsement.

(See complete requirements below.)

NOTE: Entry to the Program is competitive. Completion of the program requires field experiences, two 50-hour practicums, and satisfactory completion of key assessments.

Contact Information

For information about the program, contact Professor Helen A. Friedland at hfriedland@njcu.edu. For additional information about the application process, contact Dr. Allan Futernick at afuternick@njcu.edu

Application Requirements

Applicants for the Master of Arts in Special Education with LDTC Endorsement Eligibility must submit both of the following applications::

1. Graduate Admissions Application
2. LDTC Endorsement Eligibility Program Application

Application Deadline

Both the Graduate Admissions and LDTC Endorsement Eligibility applications, and all supporting documents specified below, must be submitted to the Office of Graduate Studies, Hepburn Hall, Room 206 by **January 15th** of each year.

Because the Master of Arts in Special Education Endorsement eligibility program is limited to a maximum of 15 candidates a year, prospective students are urged to complete the application process and submit their credentials well in advance of that deadline.

Acceptance into the program is contingent on the final recommendation of a Graduate Committee.

Upon review by the Graduate Committee of all application material received by the January 15th deadline, prospective candidates will be designated from among the applicants and scheduled for an interview with the Graduate Committee.

Final notification of candidate selection will take place on or about April 15th. Successful candidates will normally be admitted to the program for Summer Session I each year.

Admission/Documentation Requirements

Applicants for the Master of Arts in Special Education with LDTC Endorsement eligibility must meet the following department requirements and submit the specified documentation items along with their applications to the Graduate Office:

1. Have completed a NCATE- or TEAC-accredited undergraduate program in Special Education, or an allied field, such as School Psychology or Reading, with a minimum grade point average of 3.0 out of a possible 4.0.
 - **Documentation:** Official undergraduate transcripts from all schools attended (except NJCU).
2. Hold a standard teaching certificate.
 - **Documentation:** Copy of current New Jersey standard teaching certificate.
3. Have completed one year of successful teaching.
 - **Documentation:**
A letter from the Human Resources department of the applicant's school district (on official school stationery) describing the employment history, including teaching certificate of record, the date on which service began under that certificate, current assignment, and future employment.
4. Have taken the Graduate Record Exam, and met the following minimum scores: Verbal - 450, Quantitative – 450, and Analytical Writing - 4.5
 - **Documentation:**
Official copy of GRE scores taken within past 7 years.
5. Submit two letters of recommendation from professionals who can describe the applicant's potential for advanced study, knowledge of teaching and learning, ability to promote student learning, teaching skills, student achievement, and relationships with students, parents, colleagues and administrators.
 - **Documentation:**
One letter must be from the principal and the other from a vice principal or supervisor of instruction that include reference to experience teaching special populations in the K12 setting. Letters must be on official school stationery and submitted in sealed envelopes.
6. Submit a personal essay in which the applicant describes interest in becoming a Learning Disabilities Teacher Consultant, relevant study, experiences and philosophy of Special Education.
 - **Documentation:** A well-written statement of three to four pages in length, double-spaced.
7. Schedule a personal interview.
 - **Documentation:**
Candidates will be notified by the Department of Special Education of the date and time of the meeting

NOTE: The following are required for all successful applicants:

- Access to a Windows or Macintosh computer.

5.23.2007; 7.1.2008; 10/20/2008, 7/20/2009

- Access to the Internet using Netscape 6.0 or higher.
- *Prior to Endorsement, candidates must submit written evidence of three years of successful teaching experience with a copy of their Standard teaching certificate to the Center for Teacher Preparation and Partnerships in the College of Education.*

Prior Course Credits that May be Applicable to Masters of Arts in Learning Disabilities Program Requirements

Students may apply for transfer credit of up to 9 semester hours toward meeting Cluster I requirements only. Courses in Clusters II and III, 24 semester hours, must be completed at New Jersey City University.

Students who have master's level courses in Special Education from NJCU may be permitted to apply masters-level courses to the requirements in Cluster I, providing (1) they achieved a B or better, (2) the course(s) was taken within seven years of acceptance into the LDTC program, and (3) the course(s) has remained substantively the same as the current course offering. In each case, students may be required to submit a syllabus at the request of the Special Education Department. .

Applicants to this M.A. program, who hold master's level courses in Special Education from an NCATE- or TEAC-accredited program, may be permitted to apply master's-level courses to the course requirements in Cluster I, providing (1) they achieved a grade of B or better in each course; (2) the course(s) were taken within seven years of acceptance into the program; (3) an official transcript listing the course(s) to be applied, a catalog description of each course, and a Student Application for Course Waivers form has been submitted to the Office of Graduate Studies (Hepburn Hall, Room 206); and (4), the course(s) are substantively the same as those required at NJCU. In each case, students may be required to submit a course syllabus at the request of the Special Education Department.

NOTE: Once accepted into this program, candidates are required to take all remaining courses at NJCU.

Maintenance of Matriculation, Cumulative Grade Point Average Requirements, and Completion Requirements

Students must maintain a Cumulative Grade Point Average of 3.25 out of 4.0, and must complete the sequence of courses as described below.

Key assessments are embedded in Special Education courses in this program. Students must satisfactorily complete key assessments that are aligned with CEC Standards and NJCU COE Reflective Urban Practitioner Conceptual Framework. Assessment requires candidates to demonstrate consultative, diagnostic and instructional skills. Students are also required to demonstrate their skills in field experiences.

Candidates will have field experiences in most courses culminating in two practicums in the final year. The practicum provides opportunities for candidates to apply their knowledge and skills under the supervision of a university professor and an appropriately experienced LDTTC **identified by the candidate**. In most cases, the practicum is completed while the candidate continues teaching.

Program Course Requirements

Cluster I: Special Education Core Requirements (15 credits)

Code	Title	Credits
SPEC 605	Introduction to Education and Psychology of Exceptional Children	3
SPEC 600	Introduction to Learning Disabilities	3
SPEC 606	Lifespan Assessment for Children and Youth with Disabilities	3
SPEC 640	Behavior Disorders in Children and Youth	3
SPEC 675	Corrective Techniques for Teaching the Exceptional Student	3

Cluster II: LDTTC Core Requirements (12 credits)
(Courses may be taken only after completion of Cluster I and with department permission.)

Code	Title	Credits
SPEC 670	Remediation of Basic Skills	3
SPEC 672	Physiological and Psychological Learning Factors in the Education of Children with Disabilities	3
SPEC 702	Cognition, Motivation and Instructional Practice	3
SPEC 697	Diagnosis of Children with Disabilities	3

Cluster III: Clinical Core Requirements (12 credits)
(Courses may be taken only after completion of Clusters I and II, and with department permission.)

Code	Title	Credits
SPEC 673	Functioning on the Child Study Team	3
SPEC 674	Interpersonal and Consultation Techniques	3
SPEC 698	Practicum in Individual Appraisal and Remediation of Exceptional Children I	3
SPEC 699	Practicum in Individual Appraisal and Remediation of Exceptional Children II	3

Application for Admission to Graduate Studies

Note: Deadline Date for Filing

Fall — August 1, Spring — December 1, Summer — May 1

APPLICATION FEE - \$55.00*
 (*Waived for NJCU Graduate Degree Alumni)



Office of Graduate Studies
 New Jersey City University
 2039 Kennedy Boulevard
 Jersey City, New Jersey 07305-1597
 Toll-free: 1-877-NJCUGRAD
 grad_dept@njcu.edu

LDTC APPLICANT

Application will not be processed unless all questions are answered.

Personal Data

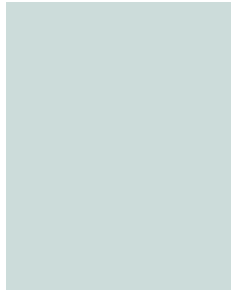
Please print clearly using a black ball point pen. See page 19 for definition of terms.

Social Security Number		Date of Birth: month day year			Sex:
					<input type="checkbox"/> Male <input type="checkbox"/> Female
Name (as it appears on your social security card)					
Last		First	Middle	Previous Name (if any)	
Permanent Address					
Street and Number		City	State	Zip	County
Current Address (if different than permanent)					
Street and Number		City	State	Zip	Until what date?
Work Phone Number		Home Phone Number		Current e-mail	
()		()			
Race: Please mark one box to indicate the race/ethnic group which best applies to you. (Optional) Information is voluntary, kept confidential, and refusal to provide this information will not subject you, the applicant, to any adverse treatment.					
<input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> African-American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Other					
Citizenship:					Place of Birth: (state/county)
<input type="checkbox"/> US Citizen <input type="checkbox"/> Non-Immigrant (student/visitor) <input type="checkbox"/> Permanent Resident					
Are you a NJ resident? If so, when did you establish continuous residency? month / year				Are you eligible for veterans educational benefits?	
<input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Visa/Permit Data

For International Students

International Student Filing Deadline: April 15

Country of present citizenship	What is your native language?	 <p style="text-align: center;">PHOTO Please write name on back of photo</p>	
Number of years you studied English	Where?		
Type of Visa you plan to attain			
What will be the source of your financial support while you study in the United States?			
Monthly \$ _____	Semesterly \$ _____		Yearly \$ _____
Name, address and telephone of a person living in the United States who knows you			
Your relationship to that person			
What are your plans after completion of your proposed studies in the United States?			

Academic Information

LDTIC CERTIFICATION ELIGIBILITY

Name and Location of Institutions:

List in chronological order (most recent first) all colleges, universities (including NJCU) and professional/technical schools attended for an undergraduate or graduate degree or classes (even if you did not receive a degree). Arrange for the Registrar of each institution attended (except NJCU), to send two official copies of all transcripts to the Office of Graduate Studies at NJCU.

Name and Location of Institution	Note: An official transcript from all institutions listed must be submitted to the Office of Graduate Studies before application can be processed.	Dates of Attendance Month/Year to Month/Year	Name of all degrees received or expected (e.g. B.A., B.S., M.A., Ph.D.)

Professional References

Name and addresses of two academic/professional references:

Employment Information

(list current or most recent first)

Employer	Address	Position or Job Title	Dates of Employment

Applicant's Signature

The statements made in this application are accurate and complete to the best of my knowledge. If I attend NJCU, I agree to comply with the rules and regulations of the University. Failure to provide full documentation or falsification of credentials may result in cancellation of admission to the University.

Signature

Date

For Official Use Only

EMPL ID _____

Last School Attended:	Graduation Date	Degree	Cum. GPA
Program Action	Admit Type		
Comments			
Academic Level	Authorized Signature		



New Jersey City University
Office of Graduate Studies

**Application for Admission
Master of Arts in Special Education
with
Learning Disabilities Teacher Consultant (LDTC) Endorsement
Eligibility
(Deadline: January 15)**

Name _____

Address _____

Telephone Number _____ Social Security # _____

I hereby APPLY FOR ADMISSION in the Master of Arts Learning Disabilities Teacher Consultant Program. I have submitted the required forms and documents as checked below.

Signature Date

Please return this application to the Office of Graduate Studies, Hepburn Hall 206.

Place a check in front of each item submitted to the Graduate Office.

- _____ 1. **Formal** Application for Admission
- _____ 2. **Official** Completed Undergraduate Transcript
- _____ 3. Letter from Human Resources Department
- _____ 4. Two Letters of Recommendation (principal and supervisor)
- _____ 5. A copy of the Teaching Certificate (CEAS or Standard) in _____
- _____ 6. Graduate Record Exam scores: Date Taken: _____
- _____ 7. Personal Essay (3 – 4 pages)
- _____ 8. Application for Course Transfer. I am requesting an evaluation of _____ credits from _____ University. I believe these credits meet course requirements for Cluster I courses. Courses in Clusters II and III must be taken at NJCU. Once accepted into the program, all courses must be taken at NJCU.

FOR OFFICE USE ONLY. DO NOT WRITE BELOW THIS LINE

Undergraduate Cumulative Average _____
Official Graduate Record Examination Scores _____ V _____ Q _____ A (or AW)
Letter from Human Resources _____
Two letters of recommendation _____
Copy of Standard Teaching Certificate _____
Personal Essay _____

REVIEWED BY _____ Date _____
Director of Graduate Studies

APPROVED BY _____ Date _____
Chairperson of Special Education /Coordinator of LDTC Program

**MASTER OF ARTS IN SPECIAL EDUCATION
STUDENT APPLICATION FOR COURSE TRANSFER FOR CLUSTER I SEQUENCE ONLY**

Please complete this form in its entirety and submit all items to the Graduate Office, Hepburn Hall 206.

University/College where courses were taken	Course Number and full title of Course	Number of Credits	Equivalent NJCU Department, Course Title, and Course Number	NJCU Number of Credits

1. **Official transcripts** must be forwarded from the sending institution to NJCU; **unofficial copies** are not acceptable.
2. **Course description** (from the university catalogue) for **each** course that is being reviewed is **required**. **For each course, students may be required to submit a syllabus at the request of the Special Education Department.**
3. You **MUST** list the equivalent course from NJCU that you believe may be applied to the **Cluster I course (s)**. **No waivers are permitted for Cluster II and II courses.**
4. You will receive verification of your request after it has been reviewed by the LDTC Coordinator.

Only completed submissions will be reviewed.

Name _____ Other name if different on transcript _____

Last 4 digits of SS # _____ Telephone number _____ email address _____

Student Signature _____ Date _____

Student Comments: