

## Associate Degree Early Childhood Education

Name: \_\_\_\_\_ Advisor: \_\_\_\_\_  
 Student ID #: \_\_\_\_\_ Approval: \_\_\_\_\_

Intended Date of Graduation: \_\_\_\_\_ Date: \_\_\_\_\_

**General Education (16 credits total)**

ENGL110-3	_____	_____
ENGL111-3	_____	_____
MATH110-3 or higher or PHIL205	_____	_____
COMM101-3	_____	_____
BIOL105-4	_____	_____
SOCY113-3	_____	_____

**Major Requirements (33 credits)**

CHLD101-3	_____	_____
CHLD105-3	_____	_____
CHLD110-3	_____	_____
CHLD111-3	_____	_____
CHLD220-3	_____	_____
CHLD260-4	_____	_____
CHLD261-4	_____	_____
CHLD270-3	_____	_____
HLTH104-3	_____	_____
HLTH181-1	_____	_____
SOCY103-3	_____	_____ OR
SOCY225-3	_____	_____

**Free Electives (minimum 7 credits)**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Cognate Requirements (6 credits)**

PSYC155-3	_____	_____ OR
PSYC265-3	_____	_____
PSYC288-3	_____	_____ OR
PSYC301-3	_____	_____

\_\_\_\_\_ Major requirements completed  
 \_\_\_\_\_ Cognate requirements completed  
 \_\_\_\_\_ General Education completed  
 \_\_\_\_\_ 62 total credits completed  
 \_\_\_\_\_ 16 of final 20 credits completed at LSSU - **Residency requirement**  
 \_\_\_\_\_ Mathematics Competency requirement completed  
 \_\_\_\_\_ 2.0 gpa overall

I certify that all departmental requirements are completed and the departmental gpa is 2.0 or higher.  
 Dean: \_\_\_\_\_ Date: \_\_\_\_\_