



**(2018-2020) Form Must Be Typed**  
**A PROPOSED DEGREE PLAN for the Master of Science in Agriculture in endorsement**  
**Area: AGRICULTURAL EXTENSION EDUCATION (NON-THESIS PLAN)**  
**(33 hours)**

**Name:** \_\_\_\_\_ **ASU ID:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CORE COURSES (12 Hours)**

Course No.	Title	Hrs	Date to be Taken	Date Completed	Grade
AE 508	Rural Economics and Community Development	3			
AN 601	Special Prob in Ag and Extension Education	3			
AN 511	Youth Organization and Program Management	3			
AG 610	Thesis I	3			

**REQUIRED COURSES (9 Hours)**

Course No.	Title	Hrs	Date to be Taken	Date Completed	Grade
AN 500	Administration of Agricultural Education	3			
AN 506	Advanced Methods of Teaching	3			
AN 515	Advanced Principles of Teaching Ag Edu	3			
PS 548	Advanced Soil Management	2			

**APPROVED ELECTIVES (12 Hours)**

Course No.	Title	Hrs	Date to be Taken	Date Completed	Grade
ED 514	Methods of Educational Research	3			
PH 513	Advanced Educational Psychology	3			
AN 584	Advanced Occupational Information	3			
AN 510	Agricultural Education Media	3			
PH 504	Psychological Statistics	3			
ED 512	Foundation of American Education	3			
AE 525	Advanced Agricultural Marketing	3			
AE 520	Advanced Farm Organization and Management	3			
PS 535	Advanced Soil Classification	3			
PS 548	Advanced Soil Management	3			
PS 601	Special Problems in Vegetables & Small Fruits	3			
AS 523	Advanced Animal Nutrition	3			
AS 533	Physiology & Anatomy of Farm Animals	3			
AS 553	Physiology of Reproduction	3			
AS 564	Special Problems in Selected Topics	3			
PS 590	Advanced Research Techniques	3			
PS 597	Agricultural Environmental Law	3			
PS 559	Advanced Soil Fertility	3			
PS 541	Agricultural Plant Pathology	3			
AG 558	Special Problems in Ag Mech	3			

Writing Requirement for Conditional Admission		Hrs	Date to be Taken	Date Completed	Grade
AN 501	Technical Writing	3			

\*Requires professional experience in agronomy and a research project is required

**TRANSFER COURSES (6 Hours)**

Course No.	Title	Hrs	Date to be Taken	Date Completed	Grade

APPROVED:

Student: \_\_\_\_\_

Graduate Advisor: \_\_\_\_\_

Department Chairperson/Dean: \_\_\_\_\_