COLLEGE OF EDUCATION
University of the Philippines Diliman

PROGRAM OF STUDY

MASTER OF ARTS IN EDUCATION
(Health Education)

Student's Name _____ Student No.: _____

Date Admitted/Started: _____ Start Date of MRR: _____

Highest Degree Attained (Bachelor's degree): _____

MAJOR COURSES.....19 units

Course Number	Course Title	Prerequisite	Units	Semester	Academic Year	Grade	Advised by: (Signature of Program Adviser)	Date Advised
EDH 201	Foundations of Health Education	None	3					
EDH 203	School Health Program	None	3					
EDH 204	Practicum In School Health	None	3					
EDH 206	Community Organization For Health Ed.	None	4					
EDH 207	Principles & Strategies of Population Education	None	3					
EDH 279	Development & Evaluation of Instructional Materials for Health Education	None	3					

RESEARCH.....6 units

Educ. 293 **OR**	Research Designs and Techniques Applied to Education **OR**	None	3					
EDRE 201	Methods in Educational Research	EDRE 101/equiv	3					
EDRE 261 **OR**	Data Analysis **OR**		3					
EDRE 231	Statistical Methods Applied to Education	EDRE 101/Stat 101/equiv	3					

EDUCATIONAL FOUNDATIONS.....3 - 6 units
(Effective 2004 an additional 3-unit foundation course should be taken by students who were non-education majors in their undergraduate program.)

EDFD 201 **OR**	Psycho-Philosophical Foundations of Education **OR**	None	3					
EDFD 221	Socio-Cultural Foundations of Educ.: A Comparative Approach	None	3					
			3					

ELECTIVE.....3 units
Any one of the Following:

EDH 209	Drug Education	None	3					
EDH 210	Safety Education	None	3					

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MAEd (Health Education)

COGNATES.....6 units

Six units of any choice of 200-level courses in Anthropology, Psychology, Social Work & Comm. Development & Sociology or **200-level courses in the College of Education in the following areas: Environmental Education & Art Education. ((**Approved on the 95th UC Meeting: April 19, 2006 (Effective First Sem. 2006-2007).

			3					
			3					

THESIS (EDUC. 300) .....6 units

Total Number of Units ..... 43 – 46 units

Prepared by:	*Approved by:*	*Noted by:*
Name & Signature of Student	Name & Signature of Program Adviser	Name & Signature of Division Chair

Received by: (OSEC) _____ Date received: _____

NOTE: PLEASE FOLLOW YOUR PROGRAM OF STUDY. ALWAYS CONSULT YOUR ADVISER.

CONFORME:

I will only take the courses included in my Program of Study. *"In consideration of my admission to the University of the Philippines and of the privileges of a student in this institution, I hereby promise and pledge to abide by and comply with all the rules and regulations laid down by competent authority in the University and in the college in which I am enrolled. Refusal to take this pledge or violation of its terms shall be sufficient cause for summary dismissal or denial of admission."* (Academic Information, University of the Philippines Diliman, General Catalogue 2004-2010).

_____ _____

Name & Signature of Student Date