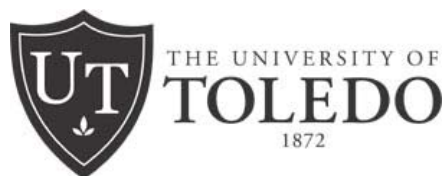


Master's Degree Plan of Study



Student No. _____ Social Security No. 987-65-4321

Name Goodstudent Ima Darn School Counseling
 Last First Middle Major for Master's Degree

Address 1234 Bancroft St. Toledo OH 43606
 Street City State Zip

BA May, 2008 Univ of Toledo Elementary Education
 Baccalaureate Degree Date Received Institution Major of Bachelor's Degree

Which is required: Thesis ___ Project ___ Neither X GRE required Yes X When Taken 06/2008

Advisor Ima Goodteacher Expected Graduation Date Spring 2011

List all graduate courses required for the degree (must total at least 48 credit hours)

| Department and Number | Course Title | Place and Date Taken or to be Taken | Credit Hours | Grade |
|-----------------------|--|-------------------------------------|--------------|-------|
| HSHS 6000 | Statistics & Research for Health Science & Human Service Professions OR | | 3 | |
| SPED 5000 | Issues in Special Education* | UT, Summer 2010 | 3 | |
| COUN 5010 | Professional Orientation to School Counseling | UT, Spring 2010 | 4 | |
| COUN 5110 | Career Counseling and Development | UT, Fall 2009 | 3 | |
| COUN 5120 | Individual and Group Assessment | UT, Summer 2010 | 3 | |
| COUN 5130 | Group Counseling | UT, Summer 2010 | 4 | |
| COUN 5140 | Counseling Theories and Techniques | UT, Fall 2009 | 4 | |
| COUN 5150 | Counseling Across the Lifespan | UT, Fall 2010 | 3 | |
| COUN 5160 | Culturally Diversity-Counseling & School Psychology | UT, Summer 2011 | 3 | |
| SPSY 5170 | Consultation I: Theories and Techniques | UT, Spring 2010 | 3 | |
| COUN 5190 | Counseling Practicum | UT, Spring 2011 | 4 | |
| COUN 6940 | Counseling Internship | UT, Fall 2011 | 8 | |
| <i>COUN 6300</i> | <i>Crisis Intervention (Elective)</i> | UT, Summer 2011 | 3 | |
| | | | | |
| | | | | |

* SPED 5000 Not required if taken as part of undergraduate or graduate teaching certification or licensure

Signature of Principal Adviser _____ Date _____ Signature of College of Graduate Studies _____ Date _____

Signature of College Dean _____ Date _____ Date of Final Approval of Plan of Study _____