

**College of Education and Technology**  
**Department of Educational Studies**  
**Master of Education**  
**Emphasis: School Counseling**  
**2008-2010**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

ID#: \_\_\_\_\_

City: \_\_\_\_\_

Telephone: \_\_\_\_\_

Required Courses	Credit	Semester Earned	Grade
COUN 501 Professional Orientation	3	_____	_____
COUN 510 School Counseling	3	_____	_____
COUN 533/EDF 500 Research Seminar/Documentary Research	3	_____	_____
COUN 542 Career and Life-style Development	3	_____	_____
COUN 555 Human Growth and Development	3	_____	_____
COUN 556 Cross-cultural Counseling	3	_____	_____
COUN 575 Counseling Assessment	3	_____	_____
COUN 544 Theories of Counseling	3	_____	_____
COUN 545 Family Counseling	3	_____	_____
COUN 547 Group Counseling	3	_____	_____
COUN 580 Counseling Children and Adolescents	3	_____	_____
_____ (elective)	3	_____	_____
_____ (elective)	3	_____	_____
_____ (elective)	3	_____	_____
COUN 549 Pre-Practicum	3	_____	_____
COUN 597 Practicum	3	_____	_____
COUN 598 Internship/Seminar	6	_____	_____
TOTAL:	48		

Required Examinations: Written Comprehensive Examination \_\_\_\_\_

\_\_\_\_\_  
**Student Signature** **date**

\_\_\_\_\_  
**Member** **date**

\_\_\_\_\_  
**Chair** **date**

\_\_\_\_\_  
**Graduate Coordinator** **date**

\_\_\_\_\_  
**Member** **date**

\_\_\_\_\_  
**Dean, Graduate School** **date**