

NAME: _____ **Part-Time CMHC PROGRAM PLAN**

Advisor: __ Estrada __ Golubovic __ Hall __ Tabet __ Tremble

Financial Aid is limited for part time students. Be sure to discuss this with your advisor

YEAR 1			
Fall	Intersession	Spring	Summer
<input type="checkbox"/> 502 Professional Orientation and Law and Ethics in Counseling <input type="checkbox"/> 520 Counseling Theories & Practice <input type="checkbox"/> 564 Counseling Skills	<input type="checkbox"/> 505 Human Development	<input type="checkbox"/> 526 Group Counseling <input type="checkbox"/> 530 Assessment Techniques in Counseling <input type="checkbox"/> 547 Risk Assessment and Trauma Intervention in Clinical Mental Health Counseling	<input type="checkbox"/> 510 Career Development Across the Lifespan <input type="checkbox"/> 515 Multicultural Counseling
Program Requirements: Program Orientation			

YEAR 2			Summer
Fall	Intersession	Spring	Summer
<input type="checkbox"/> 541 Advanced Counseling: Diagnosis and Treatment Planning <input type="checkbox"/> 542 Addictions Counseling <input type="checkbox"/> 544 Intro to Family Counseling	<input type="checkbox"/> 562 Positive Psychology OR <input type="checkbox"/> 579 Motivational Interviewing	<input type="checkbox"/> 555 Evidence Based Counseling Theory and Techniques <input type="checkbox"/> 549 Psychopharmacology <input type="checkbox"/> 550 Couples and Sexuality	<input type="checkbox"/> 598P CMHC Internship
Program Requirements: CIBA			

YEAR 3			International Requirement
Fall	Intersession	Spring	
<input type="checkbox"/> 533 Seminar in Field Based Research: Proposal Development <input type="checkbox"/> 598P CMHC Internship	<input type="checkbox"/>	<input type="checkbox"/> 534 Seminar in Field Based Research: Analysis and Reporting of Research <input type="checkbox"/> 598P CMHC Internship	<input type="checkbox"/> Global Study Course Location: _____
Program Requirements: Graduation Petition		Program Requirements: Capstone Defense	<input type="checkbox"/> Alternative Experience Date: _____ Points: _____
			Date: _____ Points: _____ Date: _____ Points: _____

Subject to Revision; Check: Counseling Student Handbook Link: <http://www.sandiego.edu/soles/gateways/current-students/handbooks-forms-policies>

Student: _____ Date: _____

Advisor: _____ Date: _____

APM: _____ Date: _____