

PLAN OF WORK
Master of Science - College Student Personnel - Revised 8/07

Student _____ Date _____

Status: Full-Time Part-Time GA Portfolio Discussed _____

Date	Course No.	Course Title	Credits
Phase I - 12 credit hours			
_____	CNS 559	Introduction to Helping Services	3
_____	CNS 515	Career Development	3
_____	CNS 600	Research and Statistics	3
_____	CNS 578	Pre-Practicum in Counseling(<i>Pre-req: CNS 559</i>)	3
Phase II - 21 credit hours required			
_____	CNS 585	Practicum in Counseling <i>(Pre-req: CNS 578, permission of advisor & attendance at Practicum/Field Orientation the prior semester & pre-registration form)</i>	3
_____	CNS 587	Research Seminar in Cns -OFFERED SUMMER ONLY <i>(Pre-req: CNS 600) ***This should be taken the summer before graduation</i>	3
_____	CNS 522	Assessment Techniques in Counseling <i>(Pre-req: CNS 559, CNS 578, CNS 600)</i>	3
_____	CNS 512	Group Counseling Leadership Skills <i>(Pre-req: CNS 578)</i>	3
_____	CNS 509	Multicultural Counseling	3
_____	CNS 560	Introduction to College Personnel Work - OFFERED SPRING ONLY	3
_____	CNS 565	The College Student and The College Environment <i>(Pre-req: CNS 560) - OFFERED FALL ONLY</i>	3
_____	_____	Leadership Elective <i>(Course selected with approval of Advisor)</i>	3
Phase III - 9 credit hours required			
_____	CNS 562	Student Personnel Work in Higher Education OFFERED SPRING ONLY	3
_____	CNS 580	Clinical Field Experience I <i>(Pre-req: Phase I, Phase II, advisor's approval, attendance at Practicum/Field Orientation, pre-registration form & Candidacy)</i>	3
_____	CNS 589	Clinical Field Experience II <i>(Pre-req: CNS 580 & pre-registration form)</i>	3
Elective Course -3 credit hours			
_____	_____	Elective <i>(Course selected with approval of Advisor)</i>	3
Research Project			
Research Project must be completed in order to receive degree			

*** Please note: Not all courses are offered each semester. MINIMUM = 48 SEM. HRS.

Date Admitted: _____ All degree work and course requirements to be completed by: _____

Plan of Work Approved By:

Student _____ Advisor _____ Date _____