

Certificate / Child & Family Mental Health and Wellness

All students must meet with the Certificate Program Director, **Dr. Penny Haney**, prior to submitting the Certificate Program of Study. Please see below for additional certificate guidelines.

NAME

BC ID

Anticipated Completion Date

SEMESTER/YEAR

Course Number and Title	Credits	Summer	Fall	Spring	Notes
Required Courses					
APSY7446 Child Psychopathology	3				
APSY7743 Counseling Families	3				
Choose 1 from the following 2 courses:					
APSY7418 Applied Child Development	3				
APSY7419 Applied Adolescent Development					
Choose 1 from the following 10 courses:					
APSY7404 College Student Development	3				
APSY6420 Positive Youth Development					
APSY7471 Psychological Responses to Humanitarian Crises					
APSY7511 Alternative Strategies, Children Affected by Organized Violence					
APSY7548 Psychology of Trauma in Childhood and Adolescence: Theory, Intervention, and Cultural and Social Justice Perspectives					
APSY7633 Impact of Psychosocial Issues					
APSY7642 Introduction to Play Therapy					
APSY7665 Developmental Disabilities: Evaluation, Assessment, Families & Systems					
APSY7666 Developmental Disabilities: Value, Policy & Change					
EDUC7621 Bilingualism, Second Language & Literacy Development					
Total Credits Required for Completion:	12				

Certificate Guidelines

➤ Certificate Only Students:

- Should meet with the Certificate Program Coordinator prior to registering for certificate courses.
- Certificate Program of Study should be submitted during the second term of enrollment in a certificate only program, prior to the opening of registration for the third term of enrollment.

➤ Graduate Program Students:

- The Certificate Program of Study must be submitted in the semester the certificate is declared.
- Certificates **cannot** be added to your record without meeting with the Certificate Program Director and submitting a signed Certificate Program of Study.

Program Information

- Have you met with the Certificate Program Director? YES NO
- Are you currently an enrolled Boston College Master's or Doctoral Student? YES NO
- If yes, please list the program: _____

Signatures/Approval

STUDENT SIGNATURE

Date

CERTIFICATE PROGRAM DIRECTOR

SIGNATURE

ASSOCIATE DEAN, GRADUATE STUDENT SERVICES

SIGNATURE

COMMENTS: