

**M.A. / School Counseling**

PreK-8

5-12

TO BE SUBMITTED DURING THE SECOND TERM OF ENROLLMENT IN THE PROGRAM, PRIOR TO THE OPENING OF REGISTRATION FOR THE THIRD TERM OF ENROLLMENT

NAME \_\_\_\_\_ ANTICIPATED COMPLETION DATE \_\_\_\_\_

SEMESTER/YEAR

BC ID \_\_\_\_\_ COMPREHENSIVE EXAMS DATE \_\_\_\_\_

MONTH/YEAR

Course Number and Title	Credits	Summer	Fall	Spring	T/W
<i>Two of the following:</i> APSY7418 Applied Child Development APSY7419 Applied Adolescent Development EDUC7438 Educating Learners with Disabilities	6				
APSY7440 Foundations of Counseling I	3				
APSY7446 Child Psychopathology	3				
APSY7448 Career Development	3				
APSY7465 Psychological Testing	3				
<i>One of the following:</i> MESA6468 Introductory Statistics MESA6469 Intermediate Statistics MESA6460 Interpretation and Evaluation of Research	3				
APSY7528 Multicultural Issues	3				
APSY7540 Issues in School Counseling	3				
APSY7606 Ethical and Legal Issues in School Counseling	3				
APSY7633 Impact of Psychosocial Issues on Learning	3				
APSY7648 Pre-Practicum Diversity and School Culture	3				
APSY7640 Group Counseling	3				
APSY7743 Counseling Families	3				
<i>One of the following:</i> APSY7940 Practicum in School Counseling I (PreK-8) APSY7950 Practicum in School Counseling I (5-12)	3				
<i>One of the following:</i> APSY7941 Practicum II (PreK-8) APSY7951 Practicum II (5-12)	3				
APSY8100 Master's Comprehensive Examination	0				
Total Credits	48				

1. Insert a T (transfer) or W (waiver) as appropriate. If seeking a transfer of credits, you must fill out a "transfer request form" available online. If requesting a waiver, you must attach an official transcript to this form.
2. Students will be considered full-time during the semester they are registered for EDUC/APSY/MESA/ELHE810001, Master's Comprehensive Exam.
3. APSY 7648 is a full year course.

ARE YOU CURRENTLY ENROLLED IN A BOSTON COLLEGE CERTIFICATE OR SPECIALIZATION PROGRAM? YES NO

IF YES, PLEASE LIST THE PROGRAM: \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPROVAL  
ADVISOR \_\_\_\_\_  
NAME SIGNATURE

ASSOCIATE  
DEAN OF  
GRADUATE  
STUDIES \_\_\_\_\_  
NAME SIGNATURE