

The University of North Texas at Dallas
College of Education
Master's of Science (MS) in Counseling Degree Plan (60 hours)

Name: _____
 Last First Middle UNT ID#

Address: _____
 Street City State Zip

Phone: _____ Email: _____

Major Professor: _____ Track: **CMHC Child** Full or Part Time: _____

Certification/Endorsement sought (if any): Licensed Professional Counselor

Course Prefix	Course Number	Course Title	Semester Hours	Term/Year To Be Taken	Grade
COUN	5710	Counseling Theories	3		
COUN	5680	Basic Counseling Skills	3		
COUN	5100	Professional Orientation and Ethical Practice	3		
EPSY	5050	Educational Research and Evaluation	3		
COUN	5670	Developmental Processes and Strategies	3		
COUN	5765	Appraisal in Counseling	3		
COUN	5470	Career Development	3		
COUN	5790	Counseling Culturally Diverse Clients	3		
COUN	5660	Advanced Counseling Skills	3		
COUN	5740	Group Counseling	3		
COUN	5690	Practicum in Counseling	3		
COUN	5720	Internship in Counseling I	3		
COUN	5721	Internship in Counseling II	3		
Track Specific Courses					
COUN	5480	Diagnosis and Treatment Planning	3		
COUN	5300	System, Leadership, Program Management in CMHC	3		
COUN	5490	Crisis Intervention	3		
COUN	5610	Drug and Addiction Education for Counselors	3		
COUN	5850	Human Sexuality in Counseling	3		
COUN	5700	Introduction to Play Therapy	3		
COUN		Elective 1	3		

Use asterisk * to indicated if transferring in course from another university. List transfer course Prefix, number, and title. Official transcripts must be on file in the Toulouse Graduate School.

Student Signature _____

Date _____

Approved _____
 Major Professor/Advisor Date

 Program Coordinator/Department Chair Date

Date of First Master's Course: _____
 Semester/Year

Date by which degree must be completed: _____
 (7 years from first semester) Semester/Year

The Student is admitted to candidacy: _____
 Date Dean of the Graduate School