## ATTACHMENT E (Curriculum Worksheet): Applicants with a counseling related field degree must fill out this form. Please refer to Part 2 of the rules and regulations (Mental Health Clinical Core Curriculum)

Name (First, M.I., and Last)			University/College		
□Masters	□Doctoral Date	Granted:	Total Graduate Hours		
Please list only sp	pecific graduate coursev	vork and only list a co	ourse once.		
Course syllabus	and actual course cata	alogue description ar	e required for all listed o	courses.	
A. HUMAN	GROWTH AND DEV	VELOPMENT (Mini	mum of 3 Semester Hours	s or 4 Quarter Hours)	
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Only
(Office Hee Onl	les) Chamilanda Cammitt	Commenter			
(Office Use Onl	ly) Standards Committ	ee Comments:			
B. SOCIAL	AND CULTURAL FO	OUNDATIONS (Min	imum of 3 Semester Hour	rs or 4 Quarter Hours	)
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Only
(Office Use Onl	ly) Standards Committ	ee Comments:			
C. HELPIN	G RELATIONSHIPS	(Minimum of 3 Seme	ster Hours or 4 Quarter H	ours)	
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Only
(Office Use Onl	ly) Standards Committ	ee Comments:			
D. GROUP	WORK (Minimum of 3	3 Semester Hours)			
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Only
(Office Use Onl	ly) Standards Committ	ee Comments:			
			linimum of 3 Semester Ho		
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Only
(Office Use Onl	ly) Standards Committ	ee Comments:			
(Office Use Onl	ly) Standards Committ	ee Comments:			

C. N.	<b>ISAL</b> (Minimum of 3 Se	mester Hours and 4 Q	Quarter Hours)		
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use On
Office Use On	ly) Standards Committee	ee Comments:			
G. RESEAI	RCH AND PROGRAM	I EVALUATION (M	inimum of 3 Semester Ho	ours or 4 Quarter Hou	rs)
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use Onl
(Office Use On	ly) Standards Committe	ee Comments:			
H. PROFES	SSIONAL ORIENTAT	<b>ION</b> (Minimum of 3	Semester Hours or 4 Quar	ter Hours)	
Course No.	Course Name	Date Taken	Semester Hours	Quarter Hours	Office Use On
I. SPECIA Case Study, P Psychopharm	acology and Advanced	TUDIES COURSE W chotherapy, DSC IV I Training.	V <b>ORK</b> Diagnosis, Treatment Plan	ning, Clinical Superv	rision,
I. SPECIA Case Study, P Psychopharm (Minimum of	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced 7 12 Semester Hours or 1	CUDIES COURSE We chotherapy, DSC IV In Training.  8 Quarter Hours)	Diagnosis, Treatment Plan	1	
I. SPECIA Case Study, P Psychopharm	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced	TUDIES COURSE W chotherapy, DSC IV I Training.		Quarter Hours	Office Use On
I. SPECIA Case Study, P Psychopharm (Minimum of	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced 7 12 Semester Hours or 1	CUDIES COURSE We chotherapy, DSC IV In Training.  8 Quarter Hours)	Diagnosis, Treatment Plan	1	Office
I. SPECIA Case Study, P Psychopharm (Minimum of Course No.	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced 7 12 Semester Hours or 1	CUDIES COURSE W chotherapy, DSC IV I Fraining. 8 Quarter Hours) Date Taken	Diagnosis, Treatment Plan	1	Office
I. SPECIA Case Study, P Psychopharm (Minimum of Course No.	Course Name  Standards Committee  LIZED CLINICAL ST  Psychodynamics and Psy acology and Advanced T  Course Name	CUDIES COURSE We chotherapy, DSC IV In Fraining.  8 Quarter Hours  Date Taken  ee Comments:	Diagnosis, Treatment Plan	Quarter Hours	Office
I. SPECIA Case Study, P Psychopharm (Minimum of Course No.	Course Name  Standards Committee  LIZED CLINICAL ST  Psychodynamics and Psy acology and Advanced T  Course Name	CUDIES COURSE We chotherapy, DSC IV In Fraining.  8 Quarter Hours  Date Taken  ee Comments:	Semester Hours	Quarter Hours	Office
I. SPECIA Case Study, P Psychopharm (Minimum of Course No.	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced T 12 Semester Hours or 1 Course Name	CUDIES COURSE We chotherapy, DSC IV I Fraining.  8 Quarter Hours)  Date Taken  Date Comments:  Minimum of 9 Semes	Semester Hours  Ster Hours or 12 Quarter F	Quarter Hours  Jours)	Office Use On
I. SPECIA Case Study, P Psychopharm (Minimum of Course No.  (Office Use On  J. SUPERV Course No.	LIZED CLINICAL ST Psychodynamics and Psy acology and Advanced T 12 Semester Hours or 1 Course Name	CUDIES COURSE We chotherapy, DSC IV I Fraining.  8 Quarter Hours)  Date Taken  Date Comments:  Minimum of 9 Semester Date Taken	Semester Hours  Ster Hours or 12 Quarter F	Quarter Hours  Jours)	Office Use On

