

TROY UNIVERSITY
GRADUATE CERTIFICATE IN ADDICTIONS COUNSELING
Certificate Plan and Progress Record
Certificate Verification
15 Semester-Hours

Name Student ID# Campus
 Address Email

Copy of transcript must be attached. May not use "Student Academic Credits" or "Academic Evaluation" report.

DEGREE REQUIREMENTS:

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| <ol style="list-style-type: none"> 1. GRE, or equivalent exam, test scores submitted. 2. Official transcripts of all academic work 3. Unconditional Admission 4. 48 semester hours of credit 5. Meet residency requirement 6. No more than two grades below "B" | <ol style="list-style-type: none"> 7. Overall GPA of 3.0 or better 8. Completion of research requirement with a "B" or better 9. All credit earned within 8 years of graduation 10. Admission to Candidacy 11. Successfully complete Comprehensive Examination 12. Intent to Graduate filed 13. Complete all counseling program requirements |
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REQUIRED CORE COURSES: (39 Semester Hours)

COURSE NO.	TITLE	HRS	GRADE	TERM/YR	TRANSFER CREDIT
CP 6665	Internship: Addictions Counseling (300 hours)	3			
CP 6666	Internship: Addictions Counseling (300 hours)	3			

SELECT THREE: (9 Semester Hours)

CP 6602	Seminar in the Prevention/Treatment of Chemical Dependency	3			
CP 6616	Treatment of Addictive Family Diseases	3			
CP 6617	Treatment Theories and Modalities of Addictive Diseases	3			
CP 6634	Drug Education, Prevention, and Intervention	3			
PSY 6610	Physiological Dynamics of alcohol and Other Drugs	3			

ITEMS TO BE DISCUSSED:

- One term limit to have transcript(s) and test score on file.
- Temporary, Conditional, and Unconditional Admission
- Available faculty for academic advisement
- Petition for transfer credit once unconditionally admitted
- Class Attendance
- Drop & Withdrawal procedure, deadline and consequences
- Petition for an incomplete grade
- Student participation in course and program evaluation

ADMISSION STATUS:

Type	Date	Initials
Conditional		
Unconditional		
Residency		
Test Score		
Comps		

STUDENT ACKNOWLEDGEMENT: I have read the current year's Graduate Catalog and acknowledge the contents and requirements of the above degree. I have received academic advising from my Faculty Adviser, and I hereby submit my degree plan.

 Student's Signature Date

Approved: _____
Chair/Associate Dean or Dean Date

 Faculty Adviser Date

Approved: _____
Associate Dean or Dean, Graduate School Date