



UNIVERSITY of
DENVER

MORGRIDGE COLLEGE OF EDUCATION

COUNSELING PSYCHOLOGY PROGRAM
COURSE WORK PLAN – MASTER OF ARTS
Clinical Mental Health Counseling Concentration
Handbook Year: 2018-2019

Student Name: _____ Student #: _____
Email: _____ Advisor: _____

Course Name	Course Number	Credit Hours	Completed
Concentration Program Requirements			
Lifespan Development*	CNP 4645	5	
Introduction to Assessment*	CNP 4702	5	
Counseling Theory*	CNP 4700	5	
Career Counseling	CNP 4710	5	
Group Counseling Theory*	CNP 4720	5	
Program Evaluation and Research Methods	CNP 4730	5	
Basic Counseling Techniques*	CNP 4740	3	
Intermediate Counseling Techniques*	CNP 4741	3	
Fieldwork in Counseling*	CNP 4743	1	
MA Counseling Clinic (2 qtrs./5 credits each)	CNP 4755	10	
Diversity: Multicultural Counseling Psychosocial Issues*	CNP 4773	5	
Psychopathology*	CNP 4784	5	
MA Counseling: Legal/Ethical Issues*	CNP 4795	5	
Subtotal		62 cr. hrs.	
	Course Number	Credit Hours	Completed
Electives			
Subtotal		13 hrs. min.	

Practicum and Internship			
Counseling Psychology Practicum: Beginning* (2 qtrs., 3 credits each)	CNP 4750	6	
MA Internship (3 qtrs., 3 credits each)	CNP 4751	9	
Subtotal		15	
Transfer Credit			
Subtotal		90	

* The course needs to be completed in year one.

SUMMARY	Credit Hours Required	Student Hours per Transcript
Concentration	62	
Electives	13 min.	
Practicum and Internship	15	
Transfer Credit		
TOTAL	90 min.	

Additional Degree Requirements

1. Passing the program comprehensive exam is required.
2. Grade Policy: A satisfactory quality of achievement with a cumulative grade point average of "B" (3.0) or better is required by the CP Program. The average is determined on the basis of the University's grading system. Any student whose overall grade point average falls below a 3.0 will be warned, put on probation, suspended, or terminated from the program. Credits carrying below a "B-" will not be accepted by the CP program as meeting degree requirements.
3. Students should contact the National Board for Certifying Counselors (NBCC) to make sure that their curriculum – especially electives – meets NBCC eligibility.

I have met with my advisor, and I have received and take responsibility for understanding the licensing requirements in the state in which I plan to obtain licensure. ☐ (check here)

Date_____

Student's Signature_____

Advisor's Signature_____