

**Course of Study Plan for the Masters of Social Work Degree  
Advanced Standing Full-Time Option  
(39 Credit Program)**

**NOTE: This form must be completed during the first semester of matriculation and verified in the last semester in the program.**

|                       |                   |                             |             |
|-----------------------|-------------------|-----------------------------|-------------|
| Last Name             | First Name        | Middle Name                 | Maiden Name |
| Banner ID             |                   | E-mail Address              |             |
| Address               | City              | State                       | Zip         |
| Home Phone Number     | Work Phone Number | Alternate Phone Number      |             |
| Date of Matriculation |                   | Expected Date of Graduation |             |
| Concentration: _____  |                   |                             |             |

| Course #                                | Course Name                                       | Credits | Date Taken | Grade |
|---|---|---------|------------|-------|
| <b>1<sup>st</sup> Semester (Summer)</b> |   |         |            |       |
| SWK 503                                 | Advanced Standing Integrative Seminar             | 3       |            |       |
| SWK 508                                 | Diagnostic Process: Strength-Based SW Perspective | 3       |            |       |
|   | Elective (selected with advisor approval)         | 3       |            |       |
|   |   | 9 ttl   |            |       |

| Course #                                | Course Name   | Credits | Date Taken | Grade |
|---|---|---------|------------|-------|
| <b>2<sup>nd</sup> Semester (Fall)</b>   |   |         |            |       |
| SWK 601                                 | Social Work Practice III: Family and Community Practice                             | 3       |            |       |
| SWK 602                                 | <i>or</i><br>Social Work Practice III: Interdisciplinary Health Care Practice I     |         |            |       |
| SWK 610                                 | Field Practicum and Seminar III   | 4       |            |       |
| SWK 620                                 | Advanced Social Welfare Policy: Families and Communities                            | 3       |            |       |
| SWK 621                                 | <i>or</i><br>Advanced Social Welfare Policy: Interdisciplinary Health Care          |         |            |       |
| SWK 630                                 | Master's Project Development  | 3       |            |       |
|   | Elective  | 3       |            |       |
|   |   | 16 ttl  |            |       |
| <b>3<sup>rd</sup> Semester (Spring)</b> |   |         |            |       |
| SWK 603                                 | Social Work Practice IV: Family and Community Empowerment, Advocacy and Development | 3       |            |       |
| SWK 604                                 | <i>or</i><br>Social Work Practice IV: Interdisciplinary Health Care Practice II     |         |            |       |
| SWK 611                                 | Field Practicum and Seminar IV  | 5       |            |       |
| SWK 631                                 | Master's Project Implementation   | 3       |            |       |
|   | Elective  | 3       |            |       |
|   |   | 14 ttl  |            |       |

Total number of transfer credits approved \_\_\_\_\_; official transcript and supporting documentation are required before credit will be posted.

Prior written approval must be obtained from advisor for changes in this course of study plan.

On the official transcript, a statement will be posted that all requirements have been met as of the end of the term in which requirements are completed. Diplomas are prepared for May graduates. Students completing degree requirements in August or December will receive their diplomas the following May with the year the diploma is received imprinted on the diploma.

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Student Signature

Date

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Advisor Signature

Date

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Approval for Graduation

Director's Signature

Date