Graduate School GRADUATE DEGREE PLAN

| | NEW |
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REVISION

First



| Master | of Arts . |
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.....

NAME:

Last

DEGREE SOUGHT:

GRADUATE MAJOR: Marriage & Family Therapy

ADDRESS:

CONCENTRATION: _____

CWID:

SEMESTER/TERM AND YEAR OF FIRST ENROLLMENT IN ULM GRADUATE SCHOOL:

Middle/Maiden

| UNDERGRADUATE DEFICIENCIES | GRADUATE PROGRAM List course information for major area: | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--------------|------------------|-------|--|--|
| - | COURSE | SEMESTER HRS | SEMESTER OFFERED | NOTES | | |
| Major Area of Study: | MAFT 5005 | 3 | | | | |
| Undergraduate deficiencies to be | MAFT 5015 | 3 | | | | |
| removed: (List course and semester | MAFT 5021 | 3 | | | | |
| hours) | MAFT 5022 | 3 | | | | |
| | MAFT 5062 | 3 | | | | |
| | MAFT 5063 | 3 | | | | |
| | MAFT 5081 | 3 | | | | |
| | MAFT6008 | 3 | | | | |
| | MAFT6011 | 3 | | | | |
| | MAFT6012 | 3 | | | | |
| | MAFT6020 | 3 | | | | |
| | MAFT6053 | 3 | | | | |
| | MAFT 6063 | 3 | | | | |
| | MAFT6066 | 3 | | | | |
| TOTAL SEMESTER HRS: | MAFT6067 | 3 | | | | |
| | MAFT6070 | 9 | | | | |
| | COUN 5005 | 3 | | | | |
| | COUN 5060 | 3 | | | | |
| | | | | | | |
| TRANSFER CREDIT List all credit to be transferred to graduate program (Courses must be shown as they appear on the official transcript. List course and | | | | | | |

IRANSFER CREDII List all credit to be transferred to graduate program (Courses must be shown as they appear on the official transcript. List course and number, semester hours, institution, semester/quarter and year course taken, and grade received.)

Approved:

| Committee Member | Date | Major Professor | Date |
|------------------|------|------------------------------|------|
| Committee Member | Date | Graduate Program Coordinator | Date |
| Committee Member | Date | Dean, Graduate School | Date |