## WESTERN NEW MEXICO UNIVERSITY Degree Plan - Master of Social Work (2209) Non-Advanced - for Students without undergraduate BSW degree School of Social Work

Student Name:	ID#
Complete Mailing Address:	Telephone:
(incl street, city, state, zip)	Catalog Authority:
Email Address:	Advisor:
Expected Completion:	Date Admitted to Graduate School:
Intake Interview Date:	Date Admitted to MSW Program:
Social Work Core Red	<u>quirements (51 credits)</u>
Course(Credits) Sem/Year Grade	Course(Credits) <u>Sem/Year</u> <u>Grade</u>
SWK 501 Cultrl Comp in SWK Prac (3)	SWK 610 SWK Admin and Supervision (3)
SWK 502 Intro Adv General SWK Prac (3)	SWK 615 SWK Clincl Assess and Interv (3)
SWK 510 Human Behavior in Social Et (3)	SWK 620 Adv Psy-Soc Appr SWK Pr (3)
SWK 511 Generalist SWK Practice (3)	SWK 621 Community Organization/Deve (3)
SWK 522 Grp Dynamics SWK Practice (3)	SWK 630 Social Welfare Policy (3)
SWK 527 Theoris/Tech Clinicl SWK (3)	SWK 640 Applied SWK Research (3)
SWK 540 Fndtn SWK Resrch Mthds (3)	SWK 681 Advanced Field Practicum I (3)
SWK 581 Foundation Field Practicum I (3)	SWK 682 Advanced Field Practicum II (3)
SWK 582 Foundation Field Practicum II (3)	
Advisor Approved Guided Elect	tive Courses (9 credits minimum)
Course(Credits) <u>Sem/Year</u> Grade	<u>Course(Credits)</u> <u>Sem/Year</u> <u>Grade</u>
Course:( )	Course:( )
Course:( )	Course:( )
Total Credit Hours:	
(minimum of 60 required)	
Copy to Registrar on: Date:	Grad. Audit sent on: Date:
Student Signature:	Date:
Advisor Signature:	Date:
Chair, School of Social Work:	Date:
Dean, College of Professional Studies:	
	Date:

Note: All graduate credit, including transfer credit, must have been earned within the seven years prior to issuance of the graduate degree.