



**GRADUATE PROGRAM  
IN COUNSELING**

**Plan of Study for Graduate Program in Counseling**

NOTE: It should be noted that courses do fill up and sometimes the rotation of the courses in the program might change. When this happens, students will need to be flexible and work with their advisors to modify their plans to accomplish their academic goals. The course rotation is provided to help students plan and we fully intend to offer the published sections when advertised. However, just because a course is listed on the rotation at a certain time, we cannot guarantee that all students will be able to sign up for every class when it is offered.

<b>Student Information</b>	
<b>Name</b>	
<b>Phone Number</b>	
<b>Track</b>	
<b>Advisor</b>	
<b>Term Started (term/year)</b>	
<b>Expected Completion (term/year)</b>	

**Please note any additional requirements:**

<b>Core and Track Courses (8-week terms: Early Fall, Late Fall, Early Spring, Late Spring, Early Summer) Please place in chronological order of taken/planning to take</b>				
<b>Course Number</b>	<b>Course Name</b>	<b>Term &amp; Year</b>	<b>Grade</b>	<b># of Credits</b>
<b>Field Experiences (semesters: FALL, SPRING, SUMMER)</b>				
<b>Course Number</b>	<b>Course Name</b>	<b>Semester &amp; Year</b>	<b>Grade</b>	<b># of Credits</b>
<b>Intensive Courses</b>				
<b>Total Credits:</b>				

CAGS students must complete a minimum of 4 courses (12 credits).

If a CAGS student plans to complete and field experience (Practicum or Internship) with Messiah College, he/she needs to take one of the on-campus intensive courses (COUN 501 or COUN 540).

**PLEASE PRINT/SAVE A COPY FOR YOURSELF AND UPLOAD TO CANVAS ADVISING SITE.**

**YOU WILL NEED THIS PLAN OF STUDY EACH TIME YOU REGISTER FOR COURSES.**

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**Advisor Signature**

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**Date**

I acknowledge that checking this box electronically serves the same purpose as affixing my original signature to this document.

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**Student Signature**

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**Date**

I acknowledge that checking this box electronically serves the same purpose as affixing my original signature to this document.