

POST MASTER'S CERTIFICATION  
**SCHOOL COUNSELOR OPTION (31 credits)**

(Meets New Hampshire Certification Competencies for Guidance Counselor - GRADES K-12)

Last Name	First Name	M. I.	Student ID Number
Hm: _____	Wk: _____		
Phone Numbers			

**School Counselor Option (25 Credits)**

NUMBER	TITLE	CREDIT	SEMESTER	GRADE
ESECSC 610	Program Orientation/Portfolio Development	1	FA_____	_____
ESECSC 622	School Counseling: Roles, Responsibilities, and Interventions	3	FA_____	_____
ESEC 630	Lifespan Development	3	FA_____	_____
ESECSC 623	The Inclusive School Counselor	3	SP_____	_____
ESECSC 631	Assessment/Evaluation for School Counselors	3	SP_____	_____
ESECSC 652	Group Counseling in Schools	3	SP_____	_____
ESECSC 662	School Counseling: Theoretical Foundations	3	SP_____	_____
ESECSC 641	Career Development	3	SU_____	_____
ESEC 641	School Law	3	SU_____	_____

**Culminating Experience (6 Credits)**

NUMBER	TITLE	CREDIT	SEMESTER	GRADE
ESECSC 696	Internship: Elementary School	3	_____	_____
ESECSC 697	Internship: Secondary School	3	_____	_____

**Additional Courses (not required)**

NUMBER	TITLE	CREDIT	SEMESTER	GRADE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Transfer Credits:**

Transfer Course	@ Institution	= KSC Course
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Transfer Credits Awarded** \_\_\_\_\_