

PETITION

Counseling Psychology Prerequisite Transfer Approval Form

First Name:		Last Name:		ID#	
Email:			Degree:		
Major Area:			Date:		

An OFFICIAL TRANSCRIPT from an accredited institution(s) must be on file in the Records Office before the credit will be transferred, and it is my responsibility to request the transcript(s) requirements. I understand the following restrictions.

1. The four prerequisite classes listed below may be considered for transfer without a syllabus if the course title on the transcript is sufficiently similar to the relevant course at Andrews. If title is questionable, but student feels the class was similar, a course description from the bulletin when the course was taken may be provided as additional documentation. If that still is not sufficient, the syllabus will need to be reviewed. The minimum course grade is of "B-" or above.

-- GDPC514 - Psychology of Learning; -- GDPC640 - Multicultural Issues for Counselors and Psychologists
-- GDPC676 - Theories of Personality; -- EDRM611 - Applied Statistical Methods I

2. The four courses below have a clinical and research foundational component to them and would only be transferable with a syllabus from the semester the course was taken. Content must have 80% overlap with relevant class at Andrews. Minimum grade is a "B-". For any course that does not meet the criteria, the student will need to repeat the course, or with instructor permission, make-up any missing work.

--GDPC650- Practicum in Counseling; -- GDPC635- Theories and Techniques of Counseling
--GDPC638- Group Processes; -- EDRM 505/506- Research Method

(Transcript should be sent directly to the Records Office)

Institution:

Required Course	Transferred Course	Inst. Name	Year	Grade	Approve	Deny
GDPC514 Psychology of Learning					<input type="checkbox"/>	<input type="checkbox"/>
GDPC640 Multicultural Issues for Counselors and Psychologists					<input type="checkbox"/>	<input type="checkbox"/>
GDPC676 Theories of Personality					<input type="checkbox"/>	<input type="checkbox"/>
EDRM 611 Applied Statistical Method I					<input type="checkbox"/>	<input type="checkbox"/>
GDPC650 Practicum in Counseling					<input type="checkbox"/>	<input type="checkbox"/>
GDPC635 Theories and Techniques of Counseling					<input type="checkbox"/>	<input type="checkbox"/>
GDPC638 Group Processes					<input type="checkbox"/>	<input type="checkbox"/>
EDRM 505/506 Research Method					<input type="checkbox"/>	<input type="checkbox"/>

Student Initial:

Date:

*The graduate Dean's signature is needed for any exceptions to minimum standards voted by the Graduate Council, including exceptions to policies for provisional/regular admission (including English Language standards), normal course loads, residency, degree candidacy and deadlines, time limitations on degrees, credit transfers, second degrees, updating, grade changes, grade-point average requirements, academic probation, comprehensive examinations, projects/theses/dissertations, application for graduation deadlines, etc

RECOMMENDED:

Academic Advisor: ☐ Approve ☐ Deny Date:

Department Chair: ☐ Approve ☐ Deny Date:

Dean, CEIS: ☐ Approve ☐ Deny Date:

Dean, School of Graduate Studies: ☐ Approve ☐ Deny Date: