

STUDENT'S NAME: _____

PPS - SCHOOL PSYCHOLOGY CREDENTIAL COMPLETION FORM

(This form should be signed by your faculty advisor once you have completed your PPS coursework and internship. It should be attached to the Credential Application.)

<u>COUNSELING SEQUENCE:</u>					
No.	Course Title	Units	Sem./Yr. Completed	Equivalency	Units
EDS 250	Educational Research	3			
EDC 210	Multicultural/Ethnic Counseling	3			
EDS 248	Human Development and Learning	3			
EDS 231	Group Process in School Psychology	3			
<u>SPECIAL EDUCATION SEQUENCE:</u>					
EDS 201	Legal Aspects of Special Education	3			
EDS _____	Spec. Educ. Instructional Course Elective (requires advisor's prior approval)	3			
<u>SCHOOL PSYCHOLOGY SEQUENCE:</u>					
EDS 240	Functional Assessment of Behavior	3			
EDS 241	Counseling & Psychotherapy for Sch. Psych.	3			
EDS 242A	Cognitive Assessment	3			
EDS 242B	Cognitive Assessment Lab	4			
EDS 244	Social, Emotional, & Behavioral Assessment	3			
EDS 245	Psychology in the Schools	3			
EDS 246A	Sem. in Preventative Academic Interventions	3			
EDS 246B	Sem. in Prevent. Mental Health Interventions	3			
EDS 247	Assessment of Special Needs	3			
EDS 440	Practicum in Indiv. Couns./Sch. Psych.	3			
EDTE _____	Instructional Course Elective (requires advisor's prior approval)	3			
<u>CREDENTIAL SEQUENCE:</u>					
EDS 243	Assessment Practicum	6			
EDS 439	Early Fieldwork in School Psychology	1-10			
EDS 441	Internship in School Psychology	30			

APPROVED DENIED

Faculty Advisor's Signature

Date