

**HOUSTON BAPTIST UNIVERSITY DEGREE PROGRAM PLAN**  
**MASTER OF ARTS**  
**PSYCHOLOGY (MAP)**  
**Specialist in School Psychology (SSP)**

NAME: \_\_\_\_\_ H# \_\_\_\_\_  
Last First Middle

LOCAL ADDRESS: \_\_\_\_\_  
Street City/State Zip Code

DAY PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ EVENING PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CATALOG YEAR: **2022/2023** DATE: \_\_\_\_\_

**To earn a Master of Arts in Psychology (SSP), 60 semester hours are required.**

Degree Requirements		HOURS
<b>Master of Arts in Psychology Requirements</b>		
PSYC 5340	Orientation & Consultation in School Psychology	3
PSYC 5310	Ethical and Professional Issues in Psychology and Counseling	3
PSYC 5313	Methods and Techniques in Counseling	3
PSYC 5316	Child Psychopathology	3
PSYC 5323	Theories of Counseling and Psychotherapy	3
PSYC 5330	Psychology of Learning	3
EDSP 6344	Educational Appraisal of Individuals with Exceptionalities	3
PSYC 5353	Physiological Psychology	3
PSYC 6301	Principles of Human Development	3
PSYC 6305	Individual Psychological Evaluation	3
PSYC 6309	Applied Behavior Analysis	3
PSYC 6308	Methods of Group Process	3
PSYC 6320	Research Techniques and Procedures	3
PSYC 6392	Program Evaluation and Statistics	3
PSYC 6343	Personality Assessment	3
PSYC 6111	Practicum in School Psychology I	1
PSYC 6112	Practicum in School Psychology II	1
PSYC 6181	Special Topics: Current Issues in School Psychology	1
PSYC 5360	Cultural Psychology	3
EDUC 6330	Teaching Methodology for the Professional	3
PSYC 6331	Specialist in School Psychology Internship 1	3
PSYC 6332	Specialist in School Psychology Internship 2	3
<b>TOTAL HOURS</b>		<b>60</b>

**DEGREE REQUIREMENTS FOR GRADUATION:**

- Recommendation of the Department
- Transfer credits from another college or university will be reviewed and approved by the college and department.
- No grade below "C"
- No grade below a "B" in PSYC 6305 and PSYC 6343
- Overall GPA of 3.00 or above.
- Admitted to Candidacy
- Pass Comprehensive Examination
- Candidate must complete degree within five (5) years

Advisor \_\_\_\_\_ DATE \_\_\_\_\_

Dean, College of Education & Behavioral Sciences \_\_\_\_\_ DATE \_\_\_\_\_

I HAVE READ AND AGREE TO ABIDE BY ALL REQUIREMENTS ON THE DEGREE PLAN

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

THIS DEGREE PLAN IS NOT VALID UNTIL RECEIVED & PROCESSED BY THE OFFICE OF ACADEMIC RECORDS PROCESSED BY \_\_\_\_\_ DATE \_\_\_\_\_