Election of Major
Social Work (58 hours)
2014-2015 Catalog

Name_______________________________ I.D. Number____________________

Planned Degree Completion Date:   Mo._____ Yr._____

One Degree: ___BA  ___BS

Required Courses

<table>
<thead>
<tr>
<th>Course</th>
<th>Title</th>
<th>Hours</th>
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<tbody>
<tr>
<td>BIOL 102</td>
<td>Human Biology-Stages of Life</td>
<td>3.0</td>
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<tr>
<td>(OR BIOL 204)</td>
<td>Fundamentals of Human Physiology</td>
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<tr>
<td>PSYC 110</td>
<td>Introduction to Psychology</td>
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<tr>
<td>SOC 101</td>
<td>Introduction to Sociology</td>
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<td>SOWK 110</td>
<td>Service, Empowerment, and Justice: Introduction to Social Work</td>
<td>3.0</td>
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<tr>
<td>SOWK 222</td>
<td>Social Research Methods</td>
<td>3.0</td>
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<tr>
<td>SOWK 228</td>
<td>Racial, Ethnic and Gender Inequality</td>
<td>3.0</td>
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<tr>
<td>SOWK 233</td>
<td>Social Welfare as an Institution</td>
<td>3.0</td>
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<tr>
<td>SOWK 274</td>
<td>Becoming a Skilled Helper: Social Work Practice I</td>
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<tr>
<td>SOWK 334</td>
<td>Human Behavior and the Social Environment (W)</td>
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<tr>
<td>SOWK 366</td>
<td>Social Service Policy</td>
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<td>SOWK 375</td>
<td>Integrating Theory and Practice: Social Work Practice II</td>
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<tr>
<td>SOWK 475</td>
<td>Field Instruction</td>
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<tr>
<td>SOWK 476</td>
<td>Field Instruction Seminar</td>
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<td>SOWK 477</td>
<td>Synthesizing a Professional Identity: Social Work Practice III</td>
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One course selected from:

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<th>Title</th>
<th>Hours</th>
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<tr>
<td>ECON 115</td>
<td>Economic Concepts</td>
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<tr>
<td>ECON 221</td>
<td>Principles of Microeconomics</td>
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<tr>
<td>ECON 222</td>
<td>Principles of Macroeconomics</td>
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<table>
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<th>Course</th>
<th>Title</th>
<th>Hours</th>
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<tr>
<td>POSC 121</td>
<td>American National Politics</td>
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<tr>
<td>POSC 122</td>
<td>State and Local Politics</td>
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<tr>
<td>POSC 140</td>
<td>International Politics</td>
<td>3.0</td>
</tr>
<tr>
<td>POSC 233</td>
<td>Comparative Politics</td>
<td>3.0</td>
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Explain transfer, substitutions, or other irregularities:

Note: Students must apply for admission to the Social Work Program. Completion and signing of this form does not constitute admission to the Social Work Program.

Advisor Signature_________________________________________ Date_____________________

Social Work Program Director Signature_________________________________________ Date_____________________

_I understand I have final responsibility for monitoring my graduation requirements._

Student Signature_________________________________________ Date_____________________

_Return this form to the Office of the Registrar_