

Election of Minor
Human Services (21-22 hours)
2020-2021 Catalog

Name _____ I.D. Number _____

Planned Degree Completion Date: Mo. _____ Yr. _____

Major: _____

Required Courses

Do not write in shaded area

		Hours
<input type="checkbox"/>	SOC 101 Introduction to Sociology	3.0
<input type="checkbox"/>	SOWK 110 Introduction to Social Work	3.0
<input type="checkbox"/>	SOC/SOWK 228 Racial, Ethnic, & Gender Inequality	3.0
<input type="checkbox"/>	SOWK 274 Social Work Practice I	3.0
<input type="checkbox"/>	SOWK 275 Practicum in Human Services	3.0

Six hours of electives from the following courses and others approved by the Social Work Program Director:

<input type="checkbox"/>	PEAC 112 Concerning Poverty	3.0
<input type="checkbox"/>	SOC 335 Sociology of Family	3.0
<input type="checkbox"/>	SOC/SOWK 102 Human Conflict	3.0
<input type="checkbox"/>	SOC/SOWK 220 Social Gerontology	3.0
<input type="checkbox"/>	SOC/SOWK 244 Criminal Justice & Criminal Justice Sys.	3.0
<input type="checkbox"/>	SOC/SOWK 340 Youth and the Juvenile Justice System	3.0
<input type="checkbox"/>	SOWK 334 Human Behavior & the Social Env.	4.0
<input type="checkbox"/>	SOWK 366 Social Welfare Policy	3.0

Explain transfer, substitutions, or other irregularities:

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