

Name: \_\_\_\_\_

Semester Admitted: \_\_\_\_\_

**PLAN FOR MOVING FROM FOUR-YEAR TO THREE-YEAR  
ON-CAMPUS MSW PROGRAM**

<b>Fall</b> _____	<b>Spring</b> _____
<input type="checkbox"/> SWK 550 HBSE I <input type="checkbox"/> SWK 540 Social Policy	<input type="checkbox"/> SWK 650 HBSE II <input type="checkbox"/> Suggested: SWK 580 Psychopathology (or another elective)
<b>Summer</b> _____	
<input type="checkbox"/> Suggested: elective*	
<b>Fall</b> _____	<b>Spring</b> _____
<input type="checkbox"/> SWK 560 Generalist Practice I <input type="checkbox"/> SWK 595 Field	<input type="checkbox"/> SWK 563 Generalist Practice II <input type="checkbox"/> SWK 595 Field
<b>Summer</b> _____	
<input type="checkbox"/> Suggested: Elective*	
<b>Fall</b> _____	<b>Spring</b> _____
<input type="checkbox"/> SWK 691 Advanced Research I <input type="checkbox"/> SWK 661 Advanced Generalist Practice: Individuals <input type="checkbox"/> SWK 665 Advanced Generalist Practice: Organizations & Communities SWK 695 Advanced Field (or as summer block placement)	<input type="checkbox"/> SWK 692 Advanced Research II <input type="checkbox"/> SWK 640 Advanced Policy <input type="checkbox"/> SWK 664 Advanced Generalist Practice: Group and Families <input type="checkbox"/> SWK 600 Integrative Seminar <input type="checkbox"/> SWK 695 Advanced Field (or as summer block placement)

\* The MSW Program requires three electives (generally 3 courses, though we do offer some 1-credit electives), which you may take whenever works best for you. SWK 580 is considered an elective.

Four to three-year MSW students must complete three electives. Students who wish to become licensed at the Licensed Clinical Social Work level must choose SWK 580 (Psychopathology) as one of their three electives. Electives may be completed in any semester, though suggested semesters are the first spring, and the two summers before your third year.

1. If you have never taken a research or statistics class, you will need to complete such a course before beginning SWK 691. (Please see next page.)
2. Four-year MSW students who wish to complete the advanced year of the program as a full-time student (thus completing the program in three years) must petition for a change in their Program of Study by submitting a Change of Sequence Form (see below, complete both sheets) to Sandy Butler, MSW Program Coordinator by the start of the spring semester of the second year (when enrolled in SWK 563). Upon receipt of this form, Sandy Butler will consider the request in consultation with other faculty.
3. Four year to three-year MSW students who want to complete the Specialization Year Field practicum (SWK 695) by doing a Summer Block Field practicum (May to August, 38-40 hours per week, during their final semester in the program) must petition for a change in their Program of Study. To petition for a change in their Program of Study, students should 1) attend a field application information meeting, and 2) submit the MSW Specialization Year Field Petition for Change in Program of Study form to the field team by December 1<sup>st</sup> of their second fall semester.

### Request for a Change in Sequence Policy

Name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

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In the space below, clearly describe the request you are making that will require an exception to the MSW policies regarding course sequencing and/or prerequisites. Include your rationale for making this request. **Please be aware that you will still need to complete all coursework in the program and that by changing the sequence of your classes you may need to postpone your graduation date as courses are often only taught once a year. Also know that you are not eligible for financial aid if you take fewer than 6 credits, and by changing the sequence of your courses you may have semesters with fewer than 6 credits. For this request to be approved you must complete the semester-by-semester plan on page two of this form and update your Program of Study.**

Student's signature \_\_\_\_\_ Date: \_\_\_\_\_

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Advisor's comments/recommendation:

Advisor's signature \_\_\_\_\_ Date: \_\_\_\_\_

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Request Approved \_\_\_\_\_ Denied \_\_\_\_\_

MSW Coordinator Signature \_\_\_\_\_ Date: \_\_\_\_\_

<b>Semester and Year:</b> <b>Courses:</b>	<b>Semester and Year:</b> <b>Courses:</b>
<b>Semester and Year:</b> <b>Courses:</b>	<b>Semester and Year:</b> <b>Courses:</b>
<b>Semester and Year:</b> <b>Courses:</b>	<b>Semester and Year:</b> <b>Courses:</b>
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<b>Semester and Year:</b> <b>Courses:</b>	<b>Semester and Year:</b> <b>Courses:</b>

**Expected Graduation Date:**