

**WESTERN NEW MEXICO UNIVERSITY**  
**Degree Plan - Master of Social Work (2209)**  
**Advanced Standing - for Students with undergraduate BSW degree**  
**School of Social Work**

Student Name: \_\_\_\_\_ ID# \_\_\_\_\_

Complete Mailing Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 (incl street, city, state, zip) \_\_\_\_\_ Catalog Authority: \_\_\_\_\_

Email Address: \_\_\_\_\_ Advisor: \_\_\_\_\_

Expected Completion: \_\_\_\_\_ Date Admitted to Graduate School: \_\_\_\_\_

Intake Interview Date: \_\_\_\_\_ Date Admitted to MSW Program: \_\_\_\_\_

**Social Work Core Requirements (36 credits)**

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
SWK 501 Cultrl Comp/SWK Pract	(3)	_____	SWK 621 Community Organiz/Dev	(3)	_____
SWK 527 Theories/Tech Clinical SWI	(3)	_____	SWK 630 Social Welfare Policy	(3)	_____
SWK 610 SWK Admin/Supervision	(3)	_____	SWK 640 Applied SWK Research	(3)	_____
SWK 615 SWK Clincl Interv/Assess	(3)	_____	SWK 681 Adv Field Practicum I	(6)	_____
SWK 620 Adv Psy-Soc Appr SWK Pr	(3)	_____	SWK 682 Adv Field Practicum II	(6)	_____

**Advisor Approved Guided Elective Courses (9 credits minimum)**

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
Course: _____ ( )	_____	_____	Course: _____ ( )	_____	_____
Course: _____ ( )	_____	_____	Course: _____ ( )	_____	_____

**Total Credit Hours:** \_\_\_\_\_  
 (minimum of 45 required)

**Copy to Registrar on:** Date: \_\_\_\_\_ **Grad. Audit sent on:** Date: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_ Date: \_\_\_\_\_

**Chair, School of Social Work:** \_\_\_\_\_ Date: \_\_\_\_\_

**Dean, College of Professional Studies:** \_\_\_\_\_ Date: \_\_\_\_\_

**Director of Graduate Division:** \_\_\_\_\_ Date: \_\_\_\_\_

Note: All graduate credit, including transfer credit, must have been earned within the seven years prior to issuance of the graduate degree.