

WESTERN NEW MEXICO UNIVERSITY
Degree Plan - AS in Occupational Therapy Assistant
Department of Occupational Therapy and Rehabilitation Services

Student Name: _____ SSN# _____

Address: _____

Catalog Authority: 2002 Expected Completion: _____ Advisor: _____

TB Test taken (Date): _____ CPR Course taken (Date): _____

General Education and Supporting Course Requirements (32 hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
BIOL 254/256 Anat & Phys I/lab (4)	_____	_____	PSY 102 Gen'l Psychology (3)	_____	_____
BIOL 255/257 Anat & Phys II/lab (4)	_____	_____	PSY 412 Psychopathology (3)	_____	_____
COMM 110 Public Speaking (3)	_____	_____	SOC 101 General Sociology (3)	_____	_____
ENGL 101 Comp & Rhetoric I (3)	_____	_____	WELL 465 Wellness of Senior Pop. (3)	_____	_____
ENGL 102 Comp & Rhetoric II (3)	_____	_____	Guided elective (3) Select one advisor approved elective		
			Course (Credit): _____	_____	_____

Occupational Therapy Core Requirements (45 hours)

<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>	<u>Course(Credits)</u>	<u>Sem/Year</u>	<u>Grade</u>
OTA 155 Orientation to OT (2)	_____	_____	OTA 230 Functional Kinesiology (3)	_____	_____
OTA 156 Fieldwork Level Ia (1)	_____	_____	OTA 240 OT in Physical Disabil (3)	_____	_____
OTA 160 OT in Growth & Dev (3)	_____	_____	OTA 242 OT in Psychosocial Dysf (3)	_____	_____
OTA 161 Fieldwork Level Ib (1)	_____	_____	OTA 244 OT in Pediatrics (3)	_____	_____
OTA 165 Principles of OT (3)	_____	_____	OTA 255 OT Program Developmnt (2)	_____	_____
OTA 220 OT Therapeutic Media (3)	_____	_____	OTA 256 Fieldwork Level Id (2)	_____	_____
OTA 222 OT Rehab Techniques (2)	_____	_____	OTA 270 Fieldwork Level IIa (6)	_____	_____
OTA 223 Fieldwork Level Ic (2)	_____	_____	OTA 272 Fieldwork Level IIb (6)	_____	_____

Total Credit Hours (minimum of 77 required): _____

Original completed on (date): _____ **Copy to Registrar on (date):** _____

Updated on (date): _____ **Grad. Audit sent on (date):** _____

Student Signature: _____

Advisor Signature: _____