



Curriculum and Degree Intent Form MFT & MA Counseling Programs

This form is intended for students who are currently admitted to the Master of Arts in Marriage and Family Therapy degree program to declare their intent to remain in their current curriculum and retain the MFT nomenclature or transfer into the Master of Arts in Counseling with a track in Marriage, Couple and Family Counseling. (There is also an option to continue in Addiction Studies Certificate).

Those in Graduate Studies Certificate-Counseling or Non-Degree program who wish to change to a master's-level program in Counseling will need to consult with their Student Service Director so that Admissions requirements can be understood.

Before you agree to this please read and understand the degree requirements for your current degree/catalog year on record and if applicable the degree/catalog year you are intending to move into. If you are unsure of your catalog year and requirements, check the degree progress report in S.I.S. for the date. In addition, you can find the new degree program and catalog requirements online or by looking at the draft degree adult provided by your advisor/student services.

Full Name _____ Student ID _____
First Middle Last

- It is my intent to REMAIN in my current program and work toward completing those degree requirements. I have read and understood the degree/catalog requirements listed in my S.I.S. degree progress.

My current plan is to complete my degree by: _____

- It is my intent to TRANSFER to the 2018-2019:
 - M.A. in Counseling -- Marriage, Couple and Family Counseling Track
 - M.A. in Counseling -- Marriage, Couple and Family Counseling Track w/ Addiction Studies CertificateI have read and understand the 2018-2019 catalog description of the requested degree program named above.

- I have also read and understand the additional graduation requirements to pass the CPCE exam and complete practicum hours as required by the BBS. Those are: _____

- I understand that once I change into a 2018-2019 degree program, I may not transfer back my former curriculum or be eligible to graduate under the old program requirements.

Advisor's Comments _____

Advisor's Signature _____ Student Signature _____ Date _____

REGISTRAR/STUDENT SERVICES
studentservices@westernseminary.edu

OFFICE USE ONLY

Approve ___ Disapprove ___ Registrar _____ Date _____

Term of Admission _____ Comments/Provisions _____