Date of request: 03-OCT-2021

Request ID: E-2021-CECP-123

College: E

Department: CECP

Initiator name: Glinda Rawls

Initiator email: glinda.rawls@wmich.edu

Proposed effective term: 202240

Does course need General Education approval?: Y

Will course be used in teacher education?: N

If 5000 level course, prerequisites apply to: G

Proposed course data:

New Course CECP 6131

New course selected: This new course is not seeking approval as a general education course.

1. Proposed course prefix and number:

CECP 6131

2. Proposed credit hours:

2

3. Proposed course title:

Internship I

4. Proposed course prerequisites:

CECP 6120 Counseling Practicum

5. Proposed course corequisites:

None

6. Proposed course prerequisites that may be taken concurrently (before or at the same time):

None

7. Minimum grade for prerequisites (default grades are D for Undergrad and C for Grad):

 \mathbf{C}

8. Major and/or minor restrictions:

Include

9. List all the four-digit major and/or minor codes (from Banner) that are to be included or excluded:

CESM School Counseling

CEFM Marriage, Couple, and Family Counseling

CEMM Clinical Mental Health Counseling

SCNC School Counseling Graduate Certificate

10. Classification restrictions:

Exclude

11. List all the classifications (freshman, sophomore, junior, senior) that are to be included or excluded: Freshman, Sophomore, Junior, Senior

12. Level restriction:

Include

13. List the level (undergraduate, graduate) that is to be included or excluded.

GR

- 14. Do prerequisites and corequisites for 5000-level courses apply to undergraduates, graduates, or both? Not Applicable
- 15. Is this a multi-topic course?

No

16. Proposed course title to be entered in Banner:

Internship I

17. Is this course repeatable for credit?

No

18. Is this course mandatory credit/no credit?

Yes

19. Select class type:

Supervision or Practicum

20. How many contact hours per week for this course?

3

A. Please choose Yes or No to indicate if this class is a Teacher Education class:

No

B. Please choose the applicable class level:

Graduate

C. Please respond Yes if this is current or new WMU Essential Studies Course. Otherwise, respond No.

No

D. Explain briefly and clearly the proposed improvement.

The Counselor Education faculty would like to create a new course: CECP 6131 Internship I. This course will replace CECP 6130 Field Practicum. Field Practicum is an internship capstone course offered for all master-level counselor education programs. In this course, students are required to complete a 600-hour internship. The course is currently offered for variable credit up to a total of 4. The faculty would like to create two 3-credit hour courses where by students are required to complete a 300-hour internship in each course. This proposal is for one of those two new courses.

E. Rationale. Give your reason(s) for the proposed improvement. (If your proposal includes prerequisites, justify those, too.).

There are three reasons why the Counselor Education faculty would like to create a new three credit hour course for the internship experience. The first reason we are creating a new course is to accurately reflect faculty workload. When faculty teach a variable credit hour course like CECP 6130 Field Practicum, they receive 1 credit hour in workload in Banner even though the course meets for three hours. The Banner system reports workload for variable courses according to the minimum number of contact hours which is 1 credit. The second reason faculty want to create a new course is to meet the 2016 Council for the Accreditation of Counseling and Related Educational Programs (CACREP) standards. The CACREP standards indicates in Section Three: Professional Practice item T that when counselor education program faculty teach internship or practicum courses these courses are the equivalent of 3-credit hours per semester. This change will allow the faculty workload in teaching this course to be consistent with CACREP standards. Lastly, the faculty would like to create a new course to assist students in moving through their internship experience easier. (See Section I and J).

F. List the student learning outcomes for the proposed course or the revised or proposed major, minor, or concentration. These are the outcomes that the department will use for future assessments of the course or program.

outcomes also align with the course objectives. The course objectives/knowledge and skill outcomes are listed below. Additionally, this course has several other student learning outcomes consistent with CACREP standards for each program specialty area (clinical mental health counseling, rehabilitation counseling, school counseling, college counseling and marriage, couple, and family counseling). These student learning outcomes are also listed below.

Course Objectives/Knowledge and Skill Outcomes:

- 1. To provide supervised professional field experience consistent with standards established by professional associations and accrediting agencies.
- 2. To provide a capstone experience for master's students that bridges classroom theory and professional practice.
- 3. To develop the student's individual practice consistent with the standards and ethical practices of the profession under the tutelage of an experienced practitioner.
- G. Describe how this curriculum change is a response to student learning assessment outcomes that are part of a departmental or college assessment plan or informal assessment activities.

This new course is the result of informal assessment activities involving an examination of faculty workload when teaching internship courses and the need to meet accreditation standards for teaching internship courses. Additionally, through our informal assessment, faculty believe students may move through the internship

experience easier with two 3-credit hour courses rather than one 4-credit hour (variable) course for a 600-hour internship (See Section I and J).

H. Effect on other colleges, departments or programs. If consultation with others is required, attach evidence of consultation and support. If objections have been raised, document the resolution. Demonstrate that the program you propose is not a duplication of an existing one.

This new course is for all master level counselor education programs only. There are no effects on other colleges, departments, or programs.

- I. Effect on your department's programs. Show how the proposed change fits with other departmental offerings. This new 3-credit hour course for internship would allow the department to do several things. First it would allow the department to accurately assign faculty to a 3-credit hour workload which is consistent with our accreditation standards for internship courses. Second, this new course would help students move through their internship experience in an easier way. Currently, students have to complete a 600-hour internship through a 4credit hour variable course. Students seldomly finish all 600 clinical hours in one semester; therefore, at the end of each semester faculty teaching this course issue an incomplete. This is a challenging situation as the department chair has to determine how to put new students into the course as well as determine what to do with the continuing students who were issued an incomplete. This new course would allow students to complete their first 300 hours of clinical practice in CECP 6131 Internship I. Then, they could move onto CECP 6132 Internship II for their remaining 300 hours of clinical practice. Third, this new structure for the internship course would allow the department and students to better track completed hours of clinical practice, such that, we would all know how many hours a student completed by whether a student is in Internship I or Internship II. It would also allow the department chair to be able to assign new students to the CECP 6131 Internship I course after students have completed the first 300 hours of clinical practice. Through our informal assessment, faculty believe the new structure for this course and 3-credit hour requirement would allow students greater progression through the internship experience as they move through two 3-credit hour courses with 300 hours of required clinical practice each rather than just one course that required them to complete 600 hours of clinical practice.
- J. Effects on enrolled students: are program conflicts avoided? Will your proposal make it easier or harder for students to meet graduation requirements? Can students complete the program in a reasonable time? Show that you have considered scheduling needs and demands on students' time. If a required course will be offered during summer only, provide a rationale.

In addition to correcting the faculty workload issue and making the counselor education programs consistent with CACREP standards, this new course would make it easier for a student to move through the internship experience. Currently, nearly all students in the internship experience receive an incomplete grade at the end of the semester because many of them do not complete the 600 hours of clinical practice required to pass the course in one semester. This large number of students with an incomplete at the end of the semester means they will continue on in the same course the next semester. This situation limits the number of new students the department chair can place in the course. With this new course, CECP 6131 Internship I, students can complete their first 300 hours of clinical practice. Then, they will move onto CECP 6132 Internship II where could complete their remaining 300 hours of clinical practice. Faculty believe this new course would allow students to move through their internship experience easier.

K. Student or external market demand. What is your anticipated student audience? What evidence of student or market demand or need exists? What is the estimated enrollment? What other factors make your proposal beneficial to students?

CECP 6131 Internship I course will attract is master-level students in all of the counselor education programs. This course is required for graduation; therefore, all students in the counselor education programs must take it. The enrollment for this course is typically up to 12 students since CACREP standards require that internship

courses must have a 1:12 faculty/student ratio. We typically offer two sections of an internship course for counselor education students only in fall, spring, and summer semesters. As mentioned above, this proposed course would allow students to move more easily through the program. (See I and J). Regarding external market demand, there are three other CACREP-accredited counselor education programs in Michigan that already have two 3-credit courses for the internship experience. Those institutions are Wayne State University, Andrews University and Spring Arbor University.

L. Effects on resources. Explain how your proposal would affect department and University resources, including faculty, equipment, space, technology, and library holdings. Tell how you will staff additions to the program. If more advising will be needed, how will you provide for it? How often will course(s) be offered? What will be the initial one-time costs and the ongoing base-funding costs for the proposed program? (Attach additional pages, as necessary.)

This new course will not affect the department or university resources (i.e. faculty, equipment, space, technology, and library holdings). The counselor education department typically offers two sections of internship courses for counselor education students only each semester (fall, spring, and summer), so this new course would not create a significant change.

M. With the change from General Education to WMU Essential Studies, this question is no longer used.

For courses requesting approval as a WMU Essential Studies course, a syllabus identifying the student learning outcomes and an action plan for assessing the student learning outcomes must be attached in the Banner Workflow system.

Not Applicable

N. (Undergraduate proposals only) Describe, in detail, how this curriculum change affects transfer articulation for Michigan community colleges. For course changes, include detail on necessary changes to transfer articulation from Michigan community college courses. For new majors or minors, describe transfer guidelines to be developed with Michigan community colleges. For revisions to majors or minors, describe necessary revisions to Michigan community college guidelines. Department chairs should seek assistance from college advising directors or from the admissions office in completing this section.

Not Applicable

O. Current catalog copy:

N/A

P. Proposed catalog copy:

CECP 6131- Internship I: A supervised internship in a setting appropriate to the student's specialty area arranged in consultation with advisor and clinical coordinator. A minimum of 300 clock hours on site are required for all M.A. specialty areas. Students must be covered by individual professional counseling liability insurance while enrolled in internship.

Department Curriculum Chair approver: Carla Adkison-Johnson

Department Curriculum Chair comment:

Date: 04-OCT-2021

Department approver: Carla Adkison-Johnson

Chair comment:

Date: 04-OCT-2021

CECP 6131: Internship I

Western Michigan University Department of Counselor Education and Counseling Psychology

Hours of Credit: 3

Instructor and Contact Information:

Course Description from Catalog: CECP 6131: Internship I: A supervised internship in a setting appropriate to the student's specialty area arranged in consultation with advisor and clinical coordinator. A minimum of 300 clock hours on site are required for all M.A. specialty areas. Students must be covered by individual professional counseling liability insurance while enrolled in internship. Graded on a Credit/No-credit basis.

Department Goals Addressed in Course:

- 1. Students are expected to demonstrate a critical and scholarly approach to theory, research, and practice.
- 2. Students are expected to demonstrate competency in clinical/intervention skills.
- 3. Students are expected to demonstrate a thorough integration of science and practice.
- 4. Students shall demonstrate competence for work with multicultural and diverse populations.
- 5. Students are expected to practice within a preventive, developmental and/or remedial framework across a wide range of psychosocial functioning.
- 6. Students are expected to demonstrate a strong knowledge of, and commitment to, the ethics of their profession.
- 7. Students demonstrate a working knowledge of a variety of activities within their profession, including psychotherapy, assessment, supervision (doctoral only), teaching (doctoral only), consultation, and program evaluation, and they are able to be employed in a variety of settings.
- 8. Students are expected to understand the value of: life-long learning, involvement and contributions to one's profession, and establishing a professional identity.

Major Topics/Content Areas: The field practicum is the capstone experience for M.A. students in CECP. Individual and group supervision provide the primary place where students seek direction, consultation, and feedback on topics specific to their program area. Students are expected to use the individual and group supervision experiences to further develop the knowledge and competencies associated with their program option.

Course Objectives/Knowledge and Skill Outcomes:

- 1. To provide supervised professional field experience consistent with standards established by professional associations and accrediting agencies.
- 2. To provide a capstone experience for master's students that bridges classroom theory and professional practice.
- 3. To develop the student's individual practice consistent with the standards and ethical practices of the profession under the tutelage of an experienced practitioner.

For Counselor Education students (Clinical Mental Health Counseling; College Counseling; Marriage, Couple and Family Counseling; and School Counseling), more specific competencies for the internship experience are included in the CECP 6131 Internship Evaluation Forms.

2016 CACREP Standards Addressed in the Class	(CECP 613 Eval	30 Field I uation Fo		1
F.1. PROFESSIONAL COUNSELING ORIENTATION AND ETHICAL PRACTICE	CMHC	College			Rehab
a. history and philosophy of the counseling profession and its specialty areas					X
b. the multiple professional roles and functions of counselors across specialty areas, and their relationships with human	v	v	v	v	v
service and integrated behavioral health care systems, including interagency and interorganizational collaboration and consultation	X	X	X	X	X
c. counselors' roles and responsibilities as members of interdisciplinary community outreach and emergency management	v	v	v	v	v
response teams	X	X	X	X	X
e. advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients	X	X	X	X	X
g. professional counseling credentialing, including certification, licensure, and accreditation practices and standards, and					X
the effects of public policy on these issues i. ethical standards of professional counseling organizations and credentialing bodies, and applications of ethical and legal					
considerations in professional counseling	X	X	X	X	X
j. technology's impact on the counseling profession					X
k. strategies for personal and professional self-evaluation and implications for practice	X	X	X	X	
1. self-care strategies appropriate to the counselor role	X	X	X	X	
m. the role of counseling supervision in the profession	X	X	X	X	X
F.2. SOCIAL AND CULTURAL DIVERSITY		College		School	Rehab
a. multicultural and pluralistic characteristics within and among diverse groups nationally and internationally b. theories and models of multicultural counseling, cultural identity development, and social justice and advocacy	X	X	X	X	X
c. multicultural counseling competencies	X	X	X	X	Λ
d. the impact of heritage, attitudes, beliefs, understandings, and acculturative experiences on an individual's views of					37
others	X	X	X	X	X
e. the effects of power and privilege for counselors and clients	X	X	X	X	
f. help-seeking behaviors of diverse clients			X		
g. the impact of spiritual beliefs on clients' and counselors' worldviews		X			X
h. strategies for identifying and eliminating barriers, prejudices, and processes of intentional and unintentional oppression and discrimination	X	X		X	X
F.3. HUMAN GROWTH AND DEVELOPMENT	CMHC	College	MCFC	School	Rehab
a. theories of individual and family development across the lifespan	X	X	X	X	X
b. theories of learning		X		X	X
c. theories of normal and abnormal personality development	X	X	X	X	X
d. theories and etiology of addictions and addictive behaviors	X				
e. biological, neurological, and physiological factors that affect human development, functioning, and behavior	X	X	X	X	X
f. systemic and environmental factors that affect human development, functioning, and behavior	X	X	X	X	X
g. effects of crisis, disasters, and trauma on diverse individuals across the lifespan h. a general framework for understanding differing abilities and strategies for differentiated interventions	X	X	X	X	
i. ethical and culturally relevant strategies for promoting resilience and optimum development and wellness across the					
lifespan	X	X	X	X	X
F.4. CAREER DEVELOPMENT	CMHC	College	MCFC	School	Rehab
a. theories and models of career development, counseling, and decision making					X
b. approaches for conceptualizing the interrelationships among and between work, mental well-being, relationships, and	X	X	X	X	
other life roles and factors c. processes for identifying and using career, avocational, educational, occupational and labor market information					
resources, technology, and information systems					X
d. approaches for assessing the conditions of the work environment on clients' life experiences					X
e. strategies for assessing abilities, interests, values, personality and other factors that contribute to career development					X
g. strategies for advocating for diverse clients' career and educational development and employment opportunities in a					X
global economy					
h. strategies for facilitating client skill development for career, educational, and life-work planning and management	X	X Callaga	X	X Cabaal	X
F.5. COUNSELING AND HELPING RELATIONSHIPS a. theories and models of counseling	X	College X	MCFC X	X X	X
b. a systems approach to conceptualizing clients	Λ	Λ	X	Λ	X
c. theories, models, and strategies for understanding and practicing consultation					X
d. ethical and culturally relevant strategies for establishing and maintaining in-person and technology-assisted	X	X	X	X	
relationships					
f. counselor characteristics and behaviors that influence the counseling process	X	X	X	X	X
g. essential interviewing, counseling, and case conceptualization skills h. developmentally relevant counseling treatment or intervention plans	X	X	X	X	X
i. development of measurable outcomes for clients	X	X	X	X	X
j. evidence-based counseling strategies and techniques for prevention and intervention	X	X	X	X	X
k. strategies to promote client understanding of and access to a variety of community-based resources	X	X	X	X	X

	37	37	3.7		_
suicide prevention models and strategies m. crisis intervention, trauma-informed, and community-based strategies, such as Psychological First Aid	X	X	X		
n. processes for aiding students in developing a personal model of counseling	Λ	Λ			X
F.6. GROUP COUNSELING AND GROUP WORK	CMHC	College	MCFC	School	Rehab
a. theoretical foundations of group counseling and group work					X
b. dynamics associated with group process and development	X	X	X	X	X
c. therapeutic factors and how they contribute to group effectiveness				X	
d. characteristics and functions of effective group leaders				X	X
e. approaches to group formation, including recruiting, screening, and selecting members				X	
f. types of groups and other considerations that affect conducting groups in varied settings g. ethical and culturally relevant strategies for designing and facilitating groups	X	X	X	X	X
F.7. ASSESSMENT AND TESTING				School	Rehab
a. historical perspectives concerning the nature and meaning of assessment and testing in counseling	Civilie	conege	Wer c	Беноот	X
b. methods of effectively preparing for and conducting initial assessment meetings	X	X	X	X	X
c. procedures for assessing risk of aggression or danger to others, self-inflicted harm, or suicide	X			X	
e. use of assessments for diagnostic and intervention planning purposes	X	X	X	X	X
f. basic concepts of standardized and non-standardized testing, norm-referenced and criterion-referenced assessments, and					X
group and individual assessments					
g. statistical concepts, including scales of measurement, measures of central tendency, indices of variability, shapes and types of distributions, and correlations					X
h. reliability and validity in the use of assessments					X
i. use of assessments relevant to academic/educational, career, personal, and social development	X			X	X
j. use of environmental assessments and systematic behavioral observations				X	
k. use of symptom checklists, and personality and psychological testing				X	
l. use of assessment results to diagnose developmental, behavioral, and mental disorders	X		X		X
m. ethical and culturally relevant strategies for selecting, administering, and interpreting assessment and test results	X	~		X	X
F.8. RESEARCH AND PROGRAM EVALUATION	CMHC	College	MCFC	School	Rehab
a. the importance of research in advancing the counseling profession, including how to critique research to inform counseling practice	X	X	X	X	X
b. identification of evidence-based counseling practices	X	X	X	X	X
c. needs assessments	- 11	X	71	X	71
d. development of outcome measures for counseling programs	X	X	X	X	
e. evaluation of counseling interventions and programs		X		X	
f. qualitative, quantitative, and mixed research methods					X
h. statistical methods used in conducting research and program evaluation					X
i. analysis and use of data in counseling	X	X	X	X	X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or	X	X	X	X	X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation		X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING	СМНС	X		School	X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation		X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling	CMHC X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling	CMHC X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors	CMHC X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders	CMHC X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment	CMHC X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	CMHC X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including	CMHC X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks	CMHC X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders	CMHC X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses	CMHC X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health	CMHC X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling	CMHC X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling	CMHC X X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2l. legal and ethical considerations specific to clinical mental health counseling	CMHC X X X X X X X X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation 5C. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling	CMHC X X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2l. legal and ethical considerations specific to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health	CMHC X X X X X X X X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management	CMHC X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health 2i. legislation and government policy relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 2m. treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues	CMHC X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies for interfacing with integrated behavioral	X X X X X X X X X X X X X X X X X X X	X			X
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies for interfacing with integrated behavioral	CMHC X	X College	MCFC	School	X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3m. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies for interfacing with integrated behavioral	CMHC X	X College	MCFC		X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies for interfacing with integrated behavioral	CMHC X	X College College	MCFC	School	X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3c. strategies to advocate for persons with mental health	CMHC X	X College College X X	MCFC	School	X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2i. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies for interfacing with integrated behavioral	CMHC X	X College College	MCFC	School	X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING Ib. theories and models related to clinical mental health counseling Ic. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning Id. neurobiological and medical foundation and etiology of addiction and co-occurring disorders Ie. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2l. legal and ethical considerations specific to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 8c. COLLEGE COUNSELING AND STUDENT AFFAIRS 1a.	CMHC X	X College College X X X	MCFC	School	X Rehab
j. ethical and culturally relevant strategies for conducting, interpreting, and reporting the results of research and/or program evaluation SC. CLINICAL MENTAL HEALTH COUNSELING 1b. theories and models related to clinical mental health counseling 1c. principles, models, and documentation formats of biopsychosocial case conceptualization and treatment planning 1d. neurobiological and medical foundation and etiology of addiction and co-occurring disorders 1e. psychological tests and assessments specific to clinical mental health counseling 2a. roles and settings of clinical mental health counselors 2b. etiology, nomenclature, treatment, referral, and prevention of mental and emotional disorders 2c. mental health service delivery modalities within the continuum of care, such as inpatient, outpatient, partial treatment and aftercare, and the mental health counseling services networks 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. potential for substance use disorders to mimic and/or co-occur with a variety of neurological, medical, and psychological disorders 2f. impact of crisis and trauma on individuals with mental health diagnoses 2g. impact of biological and neurological mechanisms on mental health 2l. legislation and government policy relevant to clinical mental health counseling 2j. cultural factors relevant to clinical mental health counseling 2m. record keeping, third party reimbursement, and other practice and management issues in clinical mental health counseling 3a. intake interview, mental status evaluation, biopsychosocial history, mental health history, and psychological assessment for treatment planning and caseload management 3b. techniques and interventions for prevention and treatment of a broad range of mental health issues 3d. strategies to advocate for persons with mental health	CMHC X	College X X X X	MCFC	School	X Rehab

2b. roles of college counselors and student affairs professionals in relation to the operation of the institution's emergency management plan, and crises, disasters, and trauma	X
2c. roles of college counselors and student affairs professionals in collaborating with personnel from other educational	V
settings to facilitate college and postsecondary transitions	X
2d. characteristics, risk factors, and warning signs of individuals at risk for mental health and behavioral disorders	X
2e. models of violence prevention in higher education settings 2f. signs and symptoms of substance abuse in individuals in higher education settings	X X
2g. current trends in higher education and the diversity of higher education environments	X
2h. organizational culture, budgeting and finance, and personnel practices in higher education	X
2i. environmental, political, and cultural factors that affect the practice of counseling in higher education settings	X
2j. the influence of institutional, systemic, interpersonal, and intrapersonal barriers on learning and career opportunities in	X
higher education	
2k. influence of learning styles and other personal characteristics on learning 2l. policies, programs, and services that are equitable and responsive to the unique needs of individuals in higher	X
education settings	X
2m. unique needs of diverse individuals in higher education settings, including residents, commuters, distance learners,	
individuals with disabilities, adult learners, and student athletes, as well as nontraditional, international, transfer, and first-	X
generation students	
2n. higher education resources to improve student learning, personal growth, professional identity development, and	X
mental health	
20. professional organizations, preparation standards, and credentials relevant to the practice of counseling in higher education settings	X
2p. legal and ethical considerations specific to higher education environments	X
3a. collaboration within the higher education community to develop programs and interventions to promote the academic,	
social, and career success of individuals in higher education settings	X
3b. strategies to assist individuals in higher education settings with personal/social development	X
3c. interventions related to a broad range of mental health issues for individuals in higher education settings	X
3d. strategies for addiction prevention and intervention for individuals in higher education settings	X
3e. use of multiple data sources to inform programs and services in higher education settings	X
5F. MARRIAGE, COUPLE, AND FAMILY COUNSELING	CMHC College MCFC School Rehab
1a. history and development of marriage, couple, and family counseling 1b. theories and models of family systems and dynamics	X X
1c. theories and models of naminy systems and dynamics 1c. theories and models of marriage, couple, and family counseling	X
1d. sociology of the family, family phenomenology, and family of origin theories	X
1d. sociology of the family, family phenomenology, and family of origin theories 1e. principles and models of assessment and case conceptualization from a systems perspective	X X
1d. sociology of the family, family phenomenology, and family of origin theories 1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling	
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors	X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families	X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status	X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments	X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including	X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning	X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns	X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families	X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families	X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families	X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and	X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families	X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and	X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couples, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective If. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective If. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couples, and families 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective If. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 2n. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 2n. record keeping, third party reimbursement, and othe	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective If. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2n. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems perspective 3b. fostering family wellness	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems perspective 3b. fostering family wellness 3c. techniques and interventions of marriage, couple, and family counseling	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2i. impact of interpersonal violence on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2i. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 3c. techniques and interventions of marriage, couple, and family counseling 3c. techniques and interventions of marriage, couple, and family counseling 3d. conceptualizing and implementing treatment, planning, and intervention strategies in marriage	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2h. impact of interpersonal violence on marriages, couples, and families 2i. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems perspective 3b. fostering family wellness 3c. techniques and interventions of marriage, couple, and family counseling 3d. conceptualizing and implementing treatment, planning, and intervention strategies in marriage, couple, and family counseling	X X X X X X X X X X X X X X X X X X X
It. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2l. impact of interpersonal violence on marriages, couples, and families 2l. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2n. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2p. record keeping, third party reimbursement, and other practice and management considerations in marriage, couple, and family counseling 3c. etchniques and interventions of marriage, couple, and family counseling 3d. conceptualizing and implementing treatment, planning, and intervention strategies in marriage, couple, and family counseling 3d. conceptualizing and implementing treatment, planning, and interven	X X X X X X X X X X X X X X X X X X X
1c. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couples, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2l. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems perspective 3b. fostering family wellness 3c. techniques and interventions of marriage, couple, and family counseling 3e. strategies for interfacing with the legal system relevant to m	X X X X X X X X X X X X X X X X X X X
It. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriage, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2l. impact of interpersonal violence on marriages, couples, and families 2l. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 3a. assessment, evaluation, and case management for working with individuals, couples, and families from a systems perspective 3b. fostering family wellness 3c. techniques and implementing treatment, planning, and intervention strategies in marriage, couple, and family counseling 3d. conceptualizing and implementing treatment, planning, and intervention strategies in marria	X X X X X X X X X X X X X X X X X X X
1e. principles and models of assessment and case conceptualization from a systems perspective 1f. assessments relevant to marriage, couple, and family counseling 2a. roles and settings of marriages, couple, and family counselors 2b. structures of marriages, couples, and families 2c. family assessments, including diagnostic interviews, genograms, family mapping, mental diagnostic status examinations, symptom inventories, and psychoeducational and personality assessments 2d. diagnostic process, including differential diagnosis and the use of current diagnostic classification systems, including the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD) 2e. human sexuality and its effect on couple and family functioning 2f. aging and intergenerational influences and related family concerns 2g. impact of crisis and trauma on marriages, couples, and families 2h. impact of addiction on marriages, couples, and families 2l. impact of interpersonal violence on marriages, couples, and families 2j. impact of unemployment, under-employment, and changes in socioeconomic standing on marriages, couples, and families 2k. interactions of career, life, and gender roles on marriages, couples, and families 2l. physical, mental health, and psychopharmacological factors affecting marriages, couples, and families 2m. cultural factors relevant to marriage, couple, and family functioning, including the impact of immigration 2n. professional organizations, preparation standards, and credentials relevant to the practice of marriage, couple, and family counseling 2o. ethical and legal considerations and family law issues unique to the practice of marriage, couple, and family counseling 3e. strategies for interfacing with the legal system relevant to marriage, and families from a systems perspective 3b. fostering family wellness 3c. techniques and interventions of marriage, couple, and family counseling 3e. strategies for interfacing with the legal system relevant to marriage, coup	X X X X X X X X X X X X X X X X X X X

1 20 4 10 4 10 1	37
1e. assessments specific to P-12 education	X
2a. school counselor roles as leaders, advocates, and systems change agents in P-12 schools 2b. school counselor roles in consultation with families, P-12 and postsecondary school personnel, and community	X
agencies	X
2c. school counselor roles in relation to college and career readiness	X
2d. school counselor roles in school leadership and multidisciplinary teams	X
2e. school counselor roles and responsibilities in relation to the school emergency management plans, and crises, disasters,	
and trauma	X
2f. competencies to advocate for school counseling roles	X
2g. characteristics, risk factors, and warning signs of students at risk for mental health and behavioral disorders	X
2h. common medications that affect learning, behavior, and mood in children and adolescents	X
2i. signs and symptoms of substance abuse in children and adolescents as well as the signs and symptoms of living in a	
home where substance use occurs	X
2j. qualities and styles of effective leadership in schools	X
2k. community resources and referral sources	X
21. professional organizations, preparation standards, and credentials relevant to the practice of school counseling	X
2m. legislation and government policy relevant to school counseling	X
2n. legal and ethical considerations specific to school counseling	X
3a. development of school counseling program mission statements and objectives	X
3b. design and evaluation of school counseling programs	X
3c. core curriculum design, lesson plan development, classroom management strategies, and differentiated instructional	v
strategies	X
3d. interventions to promote academic development	X
3e. use of developmentally appropriate career counseling interventions and assessments	X
3f. techniques of personal/social counseling in school settings	X
3g. strategies to facilitate school and postsecondary transitions	X
3h. skills to critically examine the connections between social, familial, emotional, and behavior problems and academic	X
achievement	Λ
3i. approaches to increase promotion and graduation rates	X
3j. interventions to promote college and career readiness	X
3k. strategies to promote equity in student achievement and college access	X
31. techniques to foster collaboration and teamwork within schools	X
3m. strategies for implementing and coordinating peer intervention programs	X
3n. use of accountability data to inform decision making	X
30. use of data to advocate for programs and students	X
	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling1b. theories, models, and interventions related to rehabilitation counseling	ge MCFC School Rehab X X
 1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations,	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF),	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM)	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability on human sexuality 2i. awareness of rehabilitation counseling specialty area services and practices, as well as specialized services for specific disabilit	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability on human sexuality 2l. impact of disability on human sexuality 2l. impact of disability on human sexuality 2l. impact of organizational settings related to	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Pinctioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities 2f. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty area services and practices, as well as specialized services for specific disability	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation, caroer development, and job development and placement 1c. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty area services and practices, as well as specialized services for specific disability populations 2j. knowledge of organizational settings related to rehab	ge MCFC School Rehab
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Hental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. impact of disability on human sexuality 2i. aware	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation, caroer development, and job development and placement 1c. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities 2h. impact of disability on human sexuality 2i. awareness of rehabilitation counseling specialty area services and practices, as well as specialized services for specific disability populations 2j. knowledge of organizational settings related to rehab	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1ft. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning, Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities, as well as the disability-related implications for emergency management preparation 2h. impact of disability on human sexuality 2i. knowledge of organizational settings related t	School Rehab X X X X X X X X X
1a. history, legislation, systems, philosophy, and current trends of rehabilitation counseling 1b. theories, models, and interventions related to rehabilitation counseling 1c. principles and processes of vocational rehabilitation, career development, and job development and placement 1d. principles of independent living, self-determination, and informed choice 1e. principles of societal inclusion, participation, access, and universal design, with respect for individual differences 1f. classification, terminology, etiology, functional capacity, prognosis, and effects of disabilities 1g. methods of assessment for individuals with disabilities, including testing instruments, individual accommodations, environmental modification, and interpretation of results 2a. professional rehabilitation counseling scope of practice, roles, and settings 2b. medical and psychosocial aspects of disability, including attention to coexisting conditions 2c. individual response to disability, including the role of families, communities, and other social networks 2d. information about the existence, onset, degree, progression, and impact of an individual's disability, and an understanding of diagnostic systems including the International Classification of Functioning Disability and Health (ICF), International Classification of Diseases (ICD), and Diagnostic and Statistical Manual of Mental Disorders (DSM) 2e. impact of psychosocial influences, cultural beliefs and values, diversity and social justice issues, poverty, and health disparities, with implications for employment and quality of life for individuals with disabilities 2f. impact of socioeconomic trends, public policies, stigma, access, and attitudinal barriers as they relate to disability 2g. awareness and understanding of the impact of crisis, trauma, and disaster on individuals with disabilities 2h. impact of disabilition counseling specialty area services and practices, as well as specialized services for specific disability on human sexuality 2l. knowledge of organizational	School Rehab X X X X X X X X X

2r. administration and management of rehabilitation counseling practice, including coordination of services, payment for services, and record keeping	X
3a. evaluation of feasibility for services and case management strategies that facilitate rehabilitation and independent	X
living planning	71
3b. informal and formal assessment of the needs and adaptive, functional, and transferable skills of individuals with	X
disabilities	
3c. evaluation and application of assistive technology with an emphasis on individualized assessment and planning	X
3d. understanding and use of resources for research and evidence-based practices applicable to rehabilitation counseling	X
3e. strategies to enhance coping and adjustment to disability	X
3f. techniques to promote self-advocacy skills of individuals with disabilities to maximize empowerment and decision-	X
making throughout the rehabilitation process	Λ
3g. strategies to facilitate successful rehabilitation goals across the lifespan	X
3h. career development and employment models and strategies to facilitate recruitment, inclusion, and retention of	X
individuals with disabilities in the work place	Λ
3i. strategies to analyze work activity and labor market data and trends, to facilitate the match between an individual with	X
a disability and targeted jobs	Λ
3j. advocacy for the full integration and inclusion of individuals with disabilities, including strategies to reduce attitudinal	X
and environmental barriers	Λ
3k. assisting individuals with disabilities to obtain knowledge of and access to community and technology services and	X
resources	Λ
31. consultation with medical/health professionals or interdisciplinary teams regarding the physical/mental/cognitive	X
diagnoses, prognoses, interventions, or permanent functional limitations or restrictions of individuals with disabilities	Λ
3m. consultation and collaboration with employers regarding the legal rights and benefits of hiring individuals with	X
disabilities, including accommodations, universal design, and workplace disability prevention	Λ
<u>-</u>	

Methods of Instruction:

[Methods of Instruction - description (e.g. lecture, seminar) written to specific instructor's plan of methods to be used in course section. Following in parenthesis is example only. (This course will involve lectures, presentations, large and small group discussions, and hands-on activities to engage students with the course content. Instructional methods include power points, discussion topics, case studies, computer assisted assignments, and activity assignments to be completed during and/or outside of class. Currently this section of CECP 6131 reads as follows in the next two paragraphs.]

Internship is the capstone course for all M.A. students in CECP. Therefore, it is expected that internship sites will consist of experiences that are appropriate to the student's program option. The student's academic advisor is responsible for evaluating whether an internship site and site supervisor meet the requirements for his or her program area. The site supervisor is responsible for providing the individual supervision throughout the internship. Site supervisors are also responsible for completing the CECP 6131 Internship I Evaluation (Counselor Education students only), and for consulting with a student's academic advisor, the CECP 6131 Internship I Instructor, and/or the Clinical Coordinator as needed related to a student's progress or any student concerns. CECP 6131 Internship I Instructors are responsible for providing group supervision and for assigning the final grade for the course. Students are responsible for attending and participating in all individual and group supervision meetings, conducting themselves in a professional and ethical manner throughout the field practicum experience, and for ensuring that all paperwork required for the field practicum experience is submitted to the Internship Instructor as soon as possible after, but not before, completing the Internship Experience. Supervision requirements are specified by program area:

Supervision Requirements:

For counselor education students: Students involved in all Counselor Education programs must
participate in group supervision for an average of at least 1.5 hours per week with the Internship
Instructor. Students must also meet with their approved site supervisor for weekly individual or
triadic supervision that averages one hour per week throughout the field practicum experience.
Triadic supervision is defined as a supervision relationship consisting of one supervisor and two
students. Students are required to attend <u>all</u> individual/triadic and group supervision sessions. If a
student is unable to attend their supervision class, then they must attend the following section or

make up the required time.

Required Text(s) and Readings (Required text(s) selected from Suggested Texts) Suggested Texts

American Counseling Association (2014). Code of ethics and standards of practice. Retrieved from https://www.counseling.org/docs/default-source/ethics/2014-code-of-ethics.pdf?sfvrsn=2d58522c4

Supplemental readings as required by the instructor based on student's program area and need.

University and Department Policies

Student Academic Conduct

Students are responsible for making themselves aware of and understanding the policies and procedures in the Graduate Catalog that pertains to Academic Honesty. These policies include cheating, fabrication, falsification and forgery, multiple submission, plagiarism, complicity and computer misuse and can be found in the Graduate Catalog located at: http://catalog.wmich.edu/. If there is reason to believe you have been involved in academic dishonesty, you will be referred to the Office of Student Conduct (https://wmich.edu/conduct). You will be given the opportunity to review the charge(s). If you believe you are not responsible, you will have the opportunity for a hearing. You should consult with your instructor if you are uncertain about an issue of academic honesty prior to the submission of an assignment or test. In addition, students are encouraged to access the Code of Conduct at www.wmich.edu/conduct

Professional and Ethical Conduct

Students in the Department of Counselor Education and Counseling Psychology are expected to abide by the ethical standards associated with their field of practice. Copies of ethical standards as developed by the American Counseling Association, American Psychological Association, Commission on Rehabilitation Counselor Certification, American School Counselor Association, and American Association for Marriage and Family Therapy are available online from the respective professional organization's webpage. Links to these ethical codes may also be found on the CECP webpage at http://wmich.edu/cecp/student-resources/ethics. Students should also review the statement on ethical standards, the CECP Department Retention Policy, and the Professional Conduct Concerns From in their student handbook. The MA and Ph.D. program handbooks may be found on the CECP webpage at http://wmich.edu/cecp/student-resources/handbooks

Documentation of Student Impairment

The Department of Counselor Education and Counseling Psychology has responsibility to the public and the appropriate national and state professional associations to monitor and respond to the professional conduct of students. As detailed in the department retention policy and documented in doctoral and master's student handbooks, the faculty continuously monitor student adherence to standards of personal and professional conduct set forth in the ethical standards associated with their field of practice. This Professional Conduct Concerns form is designed to assist department faculty in communicating areas of concern to students.

Religious Observances Policy

The University is a diverse, multicultural enterprise and, as a community, we jointly embrace both individual responsibility and dignified respect for our differences. It is our general policy to permit students to fulfill obligations set aside by their faith. However, it is the student's responsibility to make arrangements with his/her instructors in advance. You must provide me written notice by e-mail at my @wmich.edu account by the end of the second class of the semester if you will have any religious absences for the semester. Students must recognize that it is their responsibility to meet all their course obligations. Instructors are not obligated to provide materials to students unless these materials would have normally been distributed to the entire class. For example, if an instructor does not normally post notes, a student cannot expect notes to be provided for lectures missed. Registrar's Office http://www.wmich.edu/registrar/calendars/interfaith

Sexual Misconduct

Students and instructors are responsible for making themselves aware of and abiding by the "Western Michigan University Sexual and Gender-Based Harassment and Violence, Intimate Partner Violence, and Stalking Policy and Procedures" related to prohibited sexual misconduct under Title IX, the Clery Act and the Violence Against Women Act (VAWA) and Campus Safe. Under this policy, responsible employees (including instructors) are required to report claims of sexual misconduct to the Title IX Coordinator or designee (located in the Office of Institutional Equity). Responsible employees are not confidential resources. For a complete list of resources and more information about the policy see www.wmich.edu/sexualmisconduct.

Accommodations for Disabilities

Both in compliance with and in the spirit of the Americans with Disabilities Act (ADA), we would like to work with you if you have a documented disability (e.g. physical, learning, psychiatric, vision, hearing, etc.) that will impact the work in this course. If you have a disability and wish to discuss reasonable academic accommodations, please contact your instructor in a timely fashion. Accommodations are not retroactive; they begin after notification. You may also contact the Office of Disability Services for Students at 269-387-2116 or at wmich.edu/disability services.

Diversity & Inclusion Statement

The College of Health and Human Services is an inclusive community of learners that embraces, respects, and advocates for human diversity. The College has a sustained commitment to eliminating disparities in health care and other human services by using dynamic methods to infuse this perspective into curricula, clinical practice, and research. For information about diversity and inclusion, please see: www.wmich.edu/students/diversity.

Civility Statement

Western Michigan University is committed to creating and sustaining an environment that honors the inherent dignity and worth of all members of the WMU community. Respectful behavior expressed verbally, textually, visually, and physically should be the norm in all university communications and venues including classrooms, meetings, offices, workplaces, forums, events, social media, and residential communities. As an institution of higher education, we welcome a diverse range of perspectives and opinions and uphold the importance of civil debate. We fully support the free exchange of ideas and beliefs, as well as the expression of provocative or unpopular ideas. It is through this process that we generate knowledge and deepen our understanding of humanity. Freedom of thought and expression may create conflict, strong emotions, and divergent ideological positions. While these effects are expected and welcomed, all members of the community have a responsibility to behave in a manner that does not harm others nor creates a hostile environment. Behavior that attacks, humiliates, belittles, or conveys hatred towards others diminishes our thriving and safe university environment. Each member of our academic community is encouraged to be thoughtful and sensitive in their choice of words and behaviors. We should be aware of how our behavior affects others. Furthermore, we carry a responsibility to challenge those who communicate intolerance, hatred, and bigotry. Words and actions matter. Everyone is asked to do their part in creating a healthy and positive university community and a culture that truly values each member's uniqueness, experiences, and perspectives.

Family Educational Rights and Privacy Act (FERPA) Guidelines

FERPA (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education. FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when he or she reaches the age of 18 or attends a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

Health Insurance Portability and Accountability Act (HIPAA) Guidelines

All healthcare providers are required to adhere to HIPAA (Health Insurance Portability and Accountability Act of 1996, Public Law 104-201) regulations regarding the privacy of client information outside of the agency setting. Unless you have the client's written permission, confidentiality must be strictly maintained when discussing or writing about clients in the classroom, in assignments, and in process recording.

University Learning Resources:

The Writing Center is a free consultation service for all WMU students, where experienced writing consultants help writers of all levels and all abilities. Our consultants help writers to determine strategies for effective communication and to make academically responsible choices at any stage in the writing process and on assignments in any field of study. Both appointments and drop-in sessions are available. The Writing Center is located in 1343 Ellsworth Hall. To learn more information, including hours of operation, and to make an appointment, visit our website at https://wmich.edu/writingcenter.

The Office of Information Technology Help Desk can assist with technological issues related to computer operation, elearning access and other software and hardware needs. They may be reached at (269) 387-4357, option 1 or by email to helpdesk@wmich.edu.To learn more information, visit their website at https://www.wmich.edu/helpdesk.

Sindecuse Health Center offers free counseling services for all enrolled WMU students. Counselors help students identify challenges and make changes to manage emotional and social difficulties that might complicate college life. We offer short-term individual, couples and group counseling for a diverse student population facing complicated decisions and/or challenging situations. To learn more information, visit their website at https://www.wmich.edu/healthcenter/counseling or call 269-387-1850.

Additional resources are available at Extended University Program (EUP) Campuses. To learn more information, visit the EUP student services website at https://wmich.edu/extended/services.

Student Affairs can assist with a variety of academic and non-academic student concerns. There may be times when faculty, staff or students at Western Michigan University find themselves concerned about a student's welfare or observe uncharacteristic behavioral changes, and may refer via a student concern form. To learn more information, visit their website at https://wmich.edu/studentaffairs/concern or call (269) 387-2152.

Student Performance Evaluation Criteria and Procedures:

Signature Assignment: The signature assignment for this course is a case presentation. Students will facilitate a 30 minute case conceptualization presentation in class. The date of the presentation is listed in the course schedule. To complete the case conceptualization assignment, students should complete the information found on pages 11-14 of the syllabus.

Assignment: An assignment for CECP 6131 is the ongoing counseling activities performed during the internship course. Students, Site supervisors, and the CECP 6131 Internship I Instructor will design experiences during internship that will facilitate the development of competencies specific to students' individual program area.

Method(s) of Evaluation/Grading Formula: The course is graded Credit/No Credit. Credit is assigned upon successful completion of the hours required, demonstrated competency as determined by the site supervisor and internship instructor, and the submission of all required forms* (see below). Throughout the internship experience, site supervisors may consult with a student's academic advisor, the Clinical Coordinator, or the Internship I Instructor regarding student progress and/or concerns. CECP 6131 Internship I Instructors will consider site supervisor evaluations, individual and group supervision participation, and any assigned activities during CECP 6131 when assigning Credit or No Credit.

Students in all CECP M.A. programs must complete a minimum of 300 clock hours during the CECP 6131 Internship I. A minimum of 120 of the 240 clock hours must be in direct service to clients and others appropriate to the program and setting. Students shall maintain a log of internship activities including amount of time spent in each activity. A summary of activities and time spent in each activity signed by the

Site Supervisor must accompany the Site Supervisor's Certificate of Completion. Students are also required to submit a separate evaluation of each of their internship sites. The CECP 6131 Internship I Instructor is responsible for reviewing all materials from the student's internship experience and assigning the course grade. In order to receive credit for CECP 6131, students must demonstrate the knowledge and skills expected of an entry-level counseling professional.

- * Required Forms for Submission at the Beginning of Field Practicum: Site Supervisor/Supervisee Agreement Form, Field Practicum Site Acceptance Form, and Supervisor Qualifications Form.
- *Required Forms for Submission at the Conclusion of Field Practicum: Log Summary, Weekly Log, Site Supervisor Field Practicum Evaluation(s), Goals, Student Evaluation of Field Practicum Site.

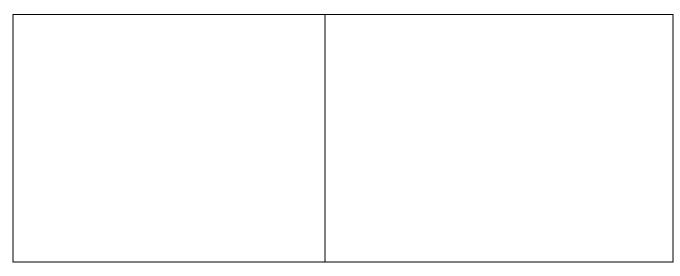
Appendix A

Signature Assignment: Case Presentation
I. Client Demographic, Background, Cultural Information:
(age, sex, race, ethnicity, sexual orientation, gender identity, religious/spiritual beliefs, disability
status, socioeconomic status, marital status, family history, living situation)
Presenting problem:
(client's reported problems/concerns: onset, persistence, history with problem, current stage of
change)
II. Verbal Content and Verbal Style:
(themes, voice, tone, rate: indications for personality/emotional state)
Nonverbal Behavior:
(eye contact, expression, body movement, posture, hygiene)

Client's Pathogenic Beliefs:
(counselor's inferences of client's irrational perspectives/cognitive distortions)
Client's Central Affects / Emotional Regulation:
(counselor's inferences of client's emotional tendencies)
III. Client's Interpersonal Style / Relational Schemas: (counselor's perspective of client's
moving toward, away, or against others; client's defensive patterns; maturational themes)
Counselor's Experience of Client:
(counselor's attraction, boredom, frustration, sympathy toward client; transference)
Client-Counselor Interaction:
(characteristics of a typical session, roles played)
Lenaracieristics of a typical session, foles played)

13.7	Assessment Date and Companing Metanicle.
<u>IV.</u>	Assessment Data and Supporting Materials:
	(OQ-45, mental status exam, SUDS, AUDIT, DAST, drawings, poetry, journals, etc.)
<u>V.</u>	<u>Differential Diagnosis</u> :
	DSM-V Diagnoses, Supporting Symptomology)
(1 OSSIDIE .	DSW- v Diagnoses, Supporting Symptomology)
Diagnostic	Impression:
(Diagnosi	s chosen from above)

<u>VI.</u>	Inferences and Assumptions: (Utilize constructs of theory as they apply to the client; From a theoretical perspective)					
<u>VII.</u>	Culturally Appropriate Treatment Goals (Short term goals: 3-6 months, Long interventions)	s and Interventions: g term goals: 6 months and beyond; Link goals and				
Short-Term	Client Goals:	Counselor Interventions:				
1.		1.				
Long-Term	Client Goals:	Counselor Interventions:				
1.		1.				



Adapted from:

CACREP 5C3a

Constantine, M. G. (2001). Multicultural training, theoretical orientation, empathy, and multicultural case conceptualization ability in counselors. *Journal of Mental Health Counseling*, 23(4), 357-372.

Loganbill, C., & Stoltenberg, C. (1983). The case conceptualization format: A training device for practicum. *Counselor Education and Supervision*, 22(3), 235-241.

McWilliams, N. (1999). Psychoanalytic case formulation. New York, NY: Guilford Press.

Stevens, M., & Morris, S. (1995). A format for case conceptualization. Counselor Education and Supervision, 35 (1), 82-94.

Appendix B

CECP 6130 – Case Conceptualization Rubric Criteria Exceeds Meets In Development Does Not Meet Exp. Expectations Expectations **Diverse Client** I. Demonstrates **Demonstrates** Demonstrates few Is confused or may Conceptualization important insights some insights into insights into be misinformed Students must be able to understand into applying applying applying about applying how the client is uniquely different multicultural multicultural multicultural multicultural and situated within their own counseling counseling counseling counseling principles, cultural cultural/social identity. Students principles, principles, principles, cultural should pay close attention to how the identity, and life cultural identity, cultural identity, identity, and life client's cultural and social identity span development. and life span and life span span development. and lifespan development might be a development. development. part of their conceptualization of the client and apply multicultural counseling principles. CACREP F3a, F2b Criteria Exceeds Meets In Development Does Not Meet Exp. **Expectations** Expectations II. **Mental Status** Demonstrates Demonstrates Demonstrates few Is confused or may Students should be able to conduct a important insights some insights into insights into be misinformed mental status examination to identify into conducting a conducting a conducting a about conducting a client's cognitive and affective mental status exam. mental status mental status mental status exam, abilities as well as verbal and gathering a exam, gathering a exam, gathering a gathering a nonverbal behaviors. Students should biopsychosocial biopsychosocial biopsychosocial biopsychosocial be able to conduct an intake history, performing history, history, history, performing interview, gather biopsychosocial an intake interview performing an performing an an intake interview history, and engage in psychological and engaging in intake interview intake interview and engaging in treatment. psychological and engaging in and engaging in psychological treatment. psychological psychological treatment.

treatment.

treatment.

III. Counselor's Observation Students should make observations about the client which could help them in their assessment and treatment of the client. Students should use environment assessments and systemic behavioral observation. CACREP F7j	Demonstrates important insights into the use of environment assessments and systemic behavioral observation.	Demonstrates some insights into the use of environment assessments and systemic behavioral observation.	Demonstrates few insights into the use of environment assessments and systemic behavioral observation.	Is confused or may be misinformed about the use of environment assessments and systemic behavioral observation.
Criteria	Exceeds Expectations	Meets Expectations	In Development	Does Not Meet Exp.
IV. Assessment Assessment is an important part of the counseling process. Students should be able to utilize a variety of assessment tools for diagnostic and intervention planning purposes. Students should also know how to use assessment to diagnose developmental, behavioral, and mental disorders. CACREP F7e, F7l	Demonstrates important insights into the use of assessment tools for diagnostic and intervention planning purposes.	Demonstrates some insights into the use of assessment tools for diagnostic and intervention planning purposes.	Demonstrates few insights into the use of assessment tools for diagnostic and intervention planning purposes.	Is confused or may be misinformed about the use of assessment tools for diagnostic and intervention planning purposes.
V. Diagnosis Students must understand the common language of the mental health profession to describe psychopathology. Students should know the diagnosis process and differential diagnosis using the DSM and ICD codes. CACREP 5C2d	Demonstrates important insights into the diagnosis process and differential diagnosis using the DSM and ICD codes.	Demonstrates some insights into the diagnosis process and differential diagnosis using the DSM and ICD codes.	Demonstrates few insights into the diagnosis process and differential diagnosis using the DSM and ICD codes.	Is confused or may be misinformed about the diagnosis process and differential diagnosis using the DSM and ICD codes.
Criteria	Exceeds Expectations	Meets Expectations	In Development	Does Not Meet Exp.
VI. Theoretical Background Students should be able to articulate the theories and models of counseling which grounds their clinical decisions. CACREP F5a	Demonstrates important insights into the articulation of theories and models of counseling which ground their clinical decisions.	Demonstrates some insights into the articulation of theories and models of counseling which ground their clinical decisions.	Demonstrates few insights into the articulation of theories and models of counseling which ground their clinical decisions.	Is confused or may be misinformed about the articulation of theories and models of counseling which ground their clinical decisions.
VII. Treatment Planning Students should be able to develop a developmentally relevant counseling treatment and prevention plan. Students should be able to demonstrate their ability to develop evidence-based counseling techniques and interventions for prevention and treatment of a broad range of mental health issues. CACREP 5C3b, F5j, F5h, F8b	Demonstrates important insights into developing developmentally appropriate and evidence-based counseling techniques and interventions.	Demonstrates some insights into developing developmentally appropriate and evidence-based counseling techniques and interventions.	Demonstrates few insights into developing developmentally appropriate and evidence-based counseling techniques and interventions.	Is confused or may be misinformed about developing developmentally appropriate and evidence-based counseling techniques and interventions.

Exceeds	Meets	In Development	Does Not Meet Exp.
Expectations	Expectations	Some ovidence of	Control numaco or
Balanced presentation of relevant evidence based, cited, information that clearly supports a central purpose or argument and shows a thoughtful, indepth analysis of a significant topic. Ideas logically support the purpose or argument. They flow smoothly from one to another and are clearly linked to each other. The professor can follow the line of reasoning.	Reasonably balanced presentation of relevant, evidence based, cited, information to support a central purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They are usually clearly linked to each other. For the most part, the professor can follow the line of	Some evidence of a central purpose or argument and a balanced presentation of relevant, evidence based, cited, information. Analysis is basic or general. Ideas occasionally ideas fail to make sense together. The professor is fairly clear about what is intended.	Central purpose or argument is not clearly identified; lacks a balanced presentation of relevant, evidence base, cited, information. Analysis is vague or not evident. Ideas are frequently not logically organized. Frequently, ideas fail to make sense together. The professor struggles to identify the reasoning.
Clearly demonstrates an identification of all relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an insightful comprehensive ethical application.	Demonstrates an identification of relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an appropriate ethical application.	Demonstrates some identification of relevant ethical dimensions, professional responsibilities, and stakeholders for this context, and arrives at a mostly appropriate ethical application.	Lacks identification of relevant ethical dimensions, relevant professional responsibilities, and stakeholders, for this context and/or arrives at questionable ethical applications.
Exceeds	Meets	In Development	Does Not Meet Exp.
Expectations	Expectations	At times	Lacks cultural
clearly demonstrates cultural considerations for this context. This includes self- awareness, cross- cultural awareness, recognition of	Demonstrates cultural considerations for this context. This includes self- awareness, cross- cultural awareness, recognition of	At times demonstrates cultural considerations for this context. This includes self- awareness, cross- cultural awareness,	considerations for this context. Lacks cultural self- awareness, cross- cultural awareness, recognition of cultural differences, recognition of
	Expectations Balanced presentation of relevant evidence based, cited, information that clearly supports a central purpose or argument and shows a thoughtful, in- depth analysis of a significant topic. Ideas logically support the purpose or argument. They flow smoothly from one to another and are clearly linked to each other. The professor can follow the line of reasoning. Clearly demonstrates an identification of all relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an insightful comprehensive ethical application. Exceeds Expectations Clearly demonstrates cultural considerations for this context. This includes self- awareness, cross- cultural awareness,	Expectations Balanced presentation of relevant evidence based, cited, information that clearly supports a central purpose or argument and shows a thoughtful, in- depth analysis of a significant topic. Ideas logically support the purpose or argument. They flow smoothly from one to another and are clearly linked to each other. The professor can follow the line of reasoning. Clearly demonstrates an identification of all relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an insightful comprehensive ethical application. Exceeds Expectations Expectations Reasonably balanced presentation of relevant, evidence based, cited, information to support a central purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They are usually clearly linked to each other. For the most part, the professor can follow the line of relevant, evidence based, cited, information to support a central purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They argument. They argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They argumentand displays evidence of a basi	Expectations Balanced presentation of relevant evidence based, cited, information that clearly supports a central purpose or argument and shows a thoughtful, indepth analysis of a significant topic. Ideas logically support the purpose or argument. They flow smoothly from one to another and are clearly linked to each other. The professor can follow the line of reasoning. Clearly demonstrates an identification of all relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an insightful comprehensive ethical application. Exceeds Expectations Expectations Reasonably balanced presentation of relevant equal to balanced presentation of a central purpose or argument and a balanced presentation of relevant eth abalanced presentation of argument and displays evidence of a basic analysis of a significant topic. Ideas logically support the purpose or argument. They are usually clearly linked to each other. For the most part, the professor can follow the line of reasoning. Demonstrates an identification of relevant ethical dimensions, professional responsibilities, and stakeholders for this context and arrives at an anisightful comprehensive ethical application. Exceeds Expectations Clearly demonstrates cultural considerations for this context. This includes self-awareness, cross-cultural awareness, recognition of

	recognition of multiple perspectives, recognition of power relationships, and awareness of human choice. Clearly avoids projecting one's own culture onto everyone else's and resists stereotypes.	differences, recognition of multiple perspectives, recognition of power relationships, and awareness of human choice. Avoids projecting one's own culture onto everyone else's and resists stereotypes.	cultural differences, recognition of multiple perspectives, recognition of power relationships, and awareness of human choice. Mostly avoids projecting one's own culture onto everyone else's and resists stereotypes.	perspectives, recognition of power relationships, and/or awareness of human choice. Projects their own culture onto everyone else's and/or encourages stereotypes.
Grammar, Spelling, Writing Mechanics (punctuation, italics, capitalization, etc.) (All)	Sentences are well-phrased and varied in length and structure. They flow smoothly from one to another. Contains few APA/grammar errors as specified in the assignment.	Sentences are well-phrased and there is some variety in length and structure. The flow from sentence to sentence is generally smooth. Contains several APA/grammar errors as specified in the assignment.	Some sentences are awkwardly constructed so that the reader is occasionally distracted. Contains many APA/grammar errors as specified in the assignment.	Errors in sentence structure are frequent enough to be a major distraction. Contains excessive APA/grammar errors as specified in the assignment.
Length, Citations, Reference List (All)	Is at least the length specified in the assignment and includes 100% of the number of appropriate citations with matching references specified in the assignment.	Is at least the length specified in the assignment and includes at least 80% of the number of appropriate citations with matching references specified in the assignment.	Is at least the length specified in the assignment and includes at least 70% of the number of appropriate citations with matching references specified in the assignment.	Is less than the length specified in the assignment and/or includes 69% or fewer of the number of appropriate citations with matching references specified in the assignment.

CECP 6131 Internship I Course Schedule Fall 2022

Date	Topic
Week 1:	Orient new students to the forms needed for field practicum, discuss group supervision class format and structure, discuss client cases with returning field practicum students.
Week 2:	Students will discuss their work with client(s) and obtain feedback from the group and group supervision instructor(s).
Week 3:	(0)
Week 4:	(6)
Week 5:	(0)
Week 6:	4627
Week 7:	Case Presentation
Week 8:	Discuss licensure application process, national counselor examinations, malpractice insurance
Week 9:	Students will discuss their work with client(s) and obtain feedback from the group and group supervision instructor.
Week 10:	Case Presentation
Week 11:	Case Presentation
Week 12:	Case Presentation
Week 13:	Case Presentation
Week 14:	If you are completing your 6131 Internship I experience, upload all paperwork into TK20 except the Log Summary.
Week 15:	Class Wrap-Up Course Evaluations