

Plan of Study MPH in Community Health Education

Student's Name: _____ ID# _____

Dept: Public Health Education Major: Community Health Education

Summary of Hours Required for Degree: UNCG ____ Transfer ____ Total 45 hours

MAJOR AREA OF STUDY

Course Number	Course Title	Credit Hours	Semester/Year Taken
Core Courses			
HEA 601	Foundations of Public Health	3	
HEA 602	Epidemiology Methods	3	
HEA 604	Quantitative Methods	3	
HEA 607	Determinants of Health	3	
HEA 618	Assessment and Planning I	3	
HEA 619	Systems Leadership & Policy I	3	
HEA 621	Public Health Theories and Strategies	3	
Required Professional Courses			
HEA 614	Assessment and Planning I1	3	
HEA 615	Systems Leadership & Policy II	3	
HEA 625	Evaluation Methods	3	

Please note:

- You may not substitute courses in other departments nor independent studies for any of the courses above.
- Some courses have prerequisites so if you drop a course that is a prerequisite for a required course, your graduation may be delayed.

SUPPORTING COURSES (3 required electives- 9 semester hours)

Course Number	Course Title	Credit Hours	Semester/Year Taken

Please note:

- **All electives should be approved by your advisor AND the Director of Graduate Studies prior to taking them.**
- MPH students may register for no more than 1 independent study course per semester and no more than 6 semester hours of independent study will count toward the minimum requirements for the masters' degree.

- To be approved as an elective, an independent study must have an agreement from a supervising faculty member, a semester in which you plan to take it, a plan for the independent study, agreed upon products that are the equivalent of those in a regular course, and a standard of grading.

COURSES RECOMMENDED FOR TRANSFER FROM:

(Name of Institution. Attach final official transcript)

Course Number	Course Title	Credit Hours	Semester/Year Taken

(Students may transfer up to 1/3 of required credit hours depending on the fit of the courses from another institution with the required MPH program plan of study.) See note about transfer approval under common electives on page 6 of the handbook.

COURSES REQUIRED BUT NOT COUNTED TOWARD DEGREE (include prerequisites):

Course Number	Course Title	Credit Hours	Semester/Year Taken

CAPSTONE EXPERIENCE TO CONSIST OF:

Course Number	Course Title	Credit Hours	Semester/Year Taken
HEA 650	Community Health Internship / Practicum	6	

PROVISIONAL /ADDITIONAL REQUIREMENTS:

Student's Signature _____ Date: _____

Approved by Major Advisor and Graduate Program Director

Major Advisor: _____ Date: _____

printed name

Graduate Program Director: _____ Date: _____

printed name