

## Middlesex Community College **Therapeutic Recreation Certificate** GRADUATION CHECKLIST

2019-20 CATALOG

Requirements	Cr	Grade	Semester Taken
ENG*101 Composition	3		
HSE*202 Introduction to Counseling and Interviewing	3		
HSE*288 Developmental Practicum	3		
PSY*103 Introduction to Holistic Wellness	3		
PSY*111 General Psychology	3		
RLS*121 Introduction to Therapeutic Recreation	3		
RLS*122 Processes and Techniques in Therapeutic Recreation	3		
SOC*120 Group Dynamics	3		
<ul> <li>Directed Electives (choose Emphasis – cannot mix &amp; match)</li> <li>Emphasis I: Older Adults <ul> <li>RLS 221 Therapeutic Recreation (3 credits)</li> <li>AND choose one of the following:</li> <li>SOC 114 Sociology of Aging (3 credits)</li> <li>PSY 208 Adult Develop./Aging (3 credits)</li> </ul> </li> <li>-OR- <ul> <li>Emphasis II: Developmental, Behavioral, or Psychiatric Disabilities (Must take both of the following courses)</li> <li>PSY 245 Abnormal Psychology</li> <li>PSY 251 Behavior Disorders of Children and Youth</li> </ul> </li> </ul>	6		
Total Credits	30		

## MIDDLESEX COMMUNITY COLLEGE

Deadline to Apply: Fall: December 1<sup>st</sup> Spring/Summer: April 15<sup>th</sup>

## GRADUATION CHECKLIST 2019-2020

Graduation Year: 20\_\_\_\_\_

Year of Catalog being used\_\_\_\_\_

## **Therapeutic Recreation Certificate**

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NAME (First Name, Middle Ini	tial/Name is optional, Last Name	)	BANNER ID
STREET ADDRESS	TOWN	ZIP	PHONE#
Please note: All graduation corre	spondence will be sent to your colle	ege assigned em	nail.
	raduation ceremony if you choose t		ncement brochure and your academic e notify the Enrollment Services Office
Other college transfer credits to	pe used? Yes O No O		
From which college?			
Are they on file at MxCC? Yes	O NO O		
Are you applying for more than c	ne degree? Yes O No O		
If yes, which curriculum?			
Graduation Requirements:			
Have been met <b>O</b> Will be met	at the end of: Fall semester $\mathbf{O}$ Sp	ring Semester O	Summer Semester O
Minimum Required GPA for Graduat	ion is 2.0 Current GPA:		

\*Typed name is acceptable for signature.

ADVISOR'S SIGNATURE\* & DATE

Electronic Submissions: This form must be submitted to <u>MX-Registrar@mxcc.edu</u> from student's official college email address.

STUDENT'S SIGNATURE\* & DATE