

St. Cloud State University

Graduate Certificate in Chemical Dependency

Certificate Program Form

Student's Name (please print): _____

Social Security Number/Student ID: _____ Date _____

Address: _____
Street
City
State
Zip

COURSES	SUBSTITUTIONS	CREDITS	DATE TAKEN	PLACE, IF NOT SCSU
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CPSY 502	Professional Issues in Chem. Dep., 3 Cr.			
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CPSY 537	Theories of Chemical Dep., 3 Cr.			
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CPSY 538	Chem. Dep. Counseling in Sel. Pop.,3 Cr.			
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CPSY 539	Diagnosis, Intervention & Treatment, 3 Cr.			
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CPSY 545	Chem. Dependency Internship,3 cr. (min.)			
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CPSY 684	Psychopharmacology, 3 cr.			
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Students will have completed 6 credits of internship as CPSY 696 or CPSY 545 as part of their master's degree program. An additional 3 credits beyond the master's degree are required to meet the internship requirements for chemical dependency licensure.

CPSY	Internship			
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SIGNATURE OF STUDENT: _____

SIGNATURE OF COORDINATOR: _____ DATE _____

SIGNATURE OF GRADUATE DEAN: _____ DATE _____

Office Use Only:
 Student Notified: _____
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