



**APPLIED BEHAVIOR ANALYSIS BCBA Only
PLAN OF STUDY**

Name: _____ Address: _____

Student ID #: _____

Email Address: _____

Phone #: _____ Advisor: _____

I have read the graduate catalog

<u>COURSES</u>	<u>Credits</u>	<u>Grade</u>	<u>Term</u>
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I. Approved BACB Sequence (18 credits)

SPED 502 Research in Special Programs	3	_____	_____
SPED 515 Ethics in Education and Human Services	3	_____	_____
SPED 520 Applied Behavior Analysis	3	_____	_____
SPED 551 Assessment and Program Planning for Special Populations	3	_____	_____
SPED 574 Data Based Instruction	3	_____	_____
SPED 586 Conceptual Issues in Radical Behaviorism	3	_____	_____
AND Choose One Competency Area course:	3	_____	_____
SPED 580 Autism Spectrum Disorders: Characteristics and Interventions OR	3	_____	_____
SPED 550 Best Practices Teaching Students w/Emotional & Behavioral Disorders			

II. Internship to meet BACB approved Intensive Practicum Requirement^ (15 credits) (for supervision @750 hours)

SPED 590 Internship in ABA 1 st 15 week semester	5	_____	_____
SPED 590 Internship in ABA 2 nd 15 week semester	5	_____	_____
SPED 590 Internship in ABA 3 rd 15 week semester	5	_____	_____

^ Student is responsible to determine whether or not they need university supervision.

Total Minimum Semester Coursework Credits	21
Total Credits with Supervision	36

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Advisor: _____ **Date:** _____

Student: _____ **Date:** _____

Chair: _____ **Date:** _____

Dean: _____ **Date:** _____