



# Columbus State Community College

## PLAN OF STUDY

Name \_\_\_\_\_  
 Student # \_\_\_\_\_  
 Date Entered \_\_\_\_\_  
 Advisor \_\_\_\_\_

**CAREER AND TECHNICAL PROGRAMS**  
 Effective Autumn Quarter 2009

### MENTAL HEALTH/CHEMICAL DEPENDENCY/MENTAL RETARDATION

### Community/Habilitation Assistant Certificate

SUMMER QUARTER				AUTUMN QUARTER				WINTER QUARTER			
		CR	GR			CR	GR			CR	GR
MHCR 284 Special Studies MH/CD/MR (Early Experience)	T	3		MHCR 112 Intro to MR/DD	T	3		MHCR 135 Intervention Strategies	T	4	
MHCR 274 Program Success Skills	T	2		MHCR 284 Special Studies MH/CD/MR (Practicum in Developmental Disabilities)	T	4		MHCR 284 Special Studies MH/CD/MR (Practicum in Intervention Strategies)	T	4	
<b>TOTAL</b>		<b>5</b>		<b>TOTAL</b>		<b>7</b>		<b>TOTAL</b>		<b>8</b>	
SPRING QUARTER											
		CR	GR			CR	GR			CR	GR
MHCR 247 Teaching & Supporting Strategies	T	4									
MHCR 291 Practicum in Teaching & Supporting Strategies	T	4									
<b>TOTAL</b>		<b>8</b>									
<b>CERTIFICATE REQUIREMENTS</b>											
<b>TOTAL CERTIFICATE CREDIT HOURS 28 hours</b>											