

**Child & Adolescent Development
Advisement form Plan B Options**

Name:

Student ID:

Phone:

Email:

Major Courses

Lower division

- PSYC 1 (GE/D1)
- ChAD 60 (GE/E)
- ChAD 70 (GE/E)
- SOCI/SOCS 15 or STAT 95

Upper division

- ChAD or LLD 100W (Area Z)
- ChAD 101
- ChAD 162 or ChAD 164
- ChAD 165
- ChAD 168
- ChAD 169
- ChAD 170
- ChAD 195**

Option 1: Early Childhood Focus

- ChAD 150
- ChAD 160****
- ChAD 161
- ChAD 173
- EDSE 104, EDSE 108, HPRF 135*,
JS 136*, PSYC 142, NuFS 114B, or
SOCI 178

Option 2: Community Focus

- ChAD 104
- ChAD 157
- ChAD 158 **
- ChAD 163 or ChAD 173
- COMM 144F, HS 145, JS 152, LING 129*,
SOCI 151, SOCI 170, or URBP 133

* Meets SJSU Studies Area S requirement

** Plan to take this course the semester of graduation

Advisor's signature: _____

Advisement dates:

I understand that I am responsible for consulting the University catalog for information on all graduation requirements and that it is my responsibility to monitor my progress through MYSJSU.

Student's signature

Effective 8/21/2014 for all students who begin continuous enrollment on that date.

Revised 4/22/15