****

**APPLICATION TO TAKE GRADUATE COMPREHENSIVE EXAMINATION**

Please complete this form, obtain your advisor’s signature, and submit to the CPCE Administrator, for final approval. There is a $75 fee that will be paid individually during the CPCE online student registration process once applications are approved. These funds cover the cost of the proctor and the exam. Applications must be submitted with an unofficial transcript.

|  |  |
| --- | --- |
| Name: |  |
| Date of Request: |  |
| Phone Number: |  |
| E-mail: |  |
| Panther ID #: |  |
| Anticipated Graduation Date: |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CPCE Content Area** | **Course** | **Title** | **Semester & Year Taken** | **Grade in Course** |
| **Helping Relationships** | MHS 5400 | Counseling Skills & Techniques |  |  |
|  | MHS 6802 | Personality Theories |  |  |
| **Professional Orientation and Ethics** | MHS 6700 | Ethical, Legal & Prof. Issues in Counseling |  |  |
|  | MHS 6020 | Foundations of Mental Health Counseling |  |  |
| **Human Growth and Development** | EDP 6277 | Human Development: Lifespan |  |  |
| **Group Work** | MHS 6511 | Group Counseling |  |  |
| **Career & Life Development** | MHS 5350 | Ed. & Vocational Counseling |  |  |
| **Social and Cultural Foundations** | MHS 6428 | Cross Cultural Counseling |  |  |
| **Appraisal** | MHS 6200 | Meas. & Appraisal in Counseling |  |  |
| **Research & Program Evaluation** | EDF 5481 | Found. of Ed. Research |  |  |

Any previous CPCE Exam Attempts: \_\_\_\_yes\_\_\_no If yes, Semester \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To be eligible to take the CPCE, a graduate student must be fully admitted into the Counselor Education program at Florida International University and have a cumulative GPA of at least 3.0 at the graduate level and completed all the courses on this application.

The above student has completed appropriate course work and is recommended to take the comprehensive examination on the date requested.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Counselor Education Advisor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approval of CPCE Administrator & Date