



**HOUSTON CHRISTIAN UNIVERSITY DEGREE PLAN**  
**MASTER OF BUSINESS ADMINISTRATION (MBA) HEALTHCARE ADMINISTRATION TRACK (ONLINE)**  
**CATALOG YEAR: 2024-2025**

NAME: \_\_\_\_\_ H#: \_\_\_\_\_ DATE: \_\_\_\_\_

To earn a Master of Business Administration, 36-48 semester hours are required, depending on the undergraduate degree.

COURSE #	COURSE NAME	HOURS
<b>FOUNDATION REQUIREMENTS (FOR STUDENTS ENTERING WITHOUT A BBA DEGREE)</b>		
ACCT 5362	Accounting Principles	3
ECON 5363	Economic Principles	3
FINA 5260	Principles of Finance	2
MGMT 5260	Decision-Making Techniques for Managers	2
MGMT 5261	Management Principles	2
<b>TOTAL FOUNDATION REQUIREMENTS</b>		<b>12</b>
<b>CORE REQUIREMENTS</b>		
MGMT 6131	Spirituality at Work I	1
MGMT 6132	Spirituality at Work II	1
MGMT 6133	Spirituality at Work III	1
MGMT 6352	Organizational Behavior	3
BUSA 6315	Fundamentals of Analytics	3
FINA 6330	Financial Management	3
ACCT 6352	Accounting for Managers	3
MGMT 6392	Transformational Leadership and Ethics in Business	3
MKTG 6310	Marketing Management	3
MGMT 6334	Legal Challenges in HR Management	3
MGMT 6376	Business Strategy and Policy	3
<b>TOTAL CORE REQUIREMENTS</b>		<b>27</b>
<b>HEALTHCARE ADMINISTRATION TRACK</b>		
ECON 6353	Global Economy and Institutions	3
MGMT 6359	Health Services Management	3
FINA 6359	Healthcare Finance	3
<b>TOTAL HEALTHCARE ADMINISTRATION TRACK</b>		<b>9</b>
<b>TOTAL HOURS IN DEGREE</b>		<b>36-48</b>

**DEGREE REQUIREMENTS FOR GRADUATION:**

No more than 6 semester hours on transfer from another college or university  
 No grade below a "C"  
 Overall GPA of at least 3.00

**INTERNATIONAL TRIP**

Participation requires residential status and good academic and disciplinary standing (cumulative 3.00 GPA)

**BY SIGNING BELOW, YOU ACKNOWLEDGE THAT YOU HAVE READ AND AGREE TO ABIDE BY ALL REQUIREMENTS ON THE DEGREE PLAN. THIS DEGREE PLAN IS NOT VALID UNTIL RECEIVED & PROCESSED BY THE OFFICE OF ACADEMIC RECORDS.**

\_\_\_\_\_  
 STUDENT SIGNATURE DATE

\_\_\_\_\_  
 ACADEMIC ADVISOR DATE

\_\_\_\_\_  
 DEAN OF COLLEGE DATE

<i>Office of Academic Records Use Only</i> Processed by: _____ Date: _____
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