



HOUSTON CHRISTIAN UNIVERSITY DEGREE PROGRAM PLAN
MASTER OF ARTS
CHRISTIAN PSYCHOLOGY(MACP)

NAME: _____ H# _____
 Last First Middle

LOCAL ADDRESS: _____
 Street City/State Zip Code

DAY PHONE: _____ CELL PHONE: _____ EVENING PHONE: _____

EMAIL ADDRESS: _____

CATALOG YEAR: **2023/2024**

To earn a Master of Arts in Christian Psychology (MACP) a student must complete the following 66 hours:

COURSE NAME		HOURS
Master of Arts in Christian Psychology Degree Requirements:		
PSYC 5335	Christian Spiritual Formation for Therapists	3
PSYC 5314	Methods and Techniques in Christian Counseling	3
CHRI 5340	Systematic Theology	3
PSYC 5317	Christian Psychology and Counseling Theory	3
PSYC 5318	Biblical & Theological Foundations for Psychology & Counseling	3
PSYC 5321	Form Psychology	3
PSYC 5353	Physiological Psychology	3
PSYC 5322	Learned Bases of Behavior	3
PSYC 5310	Ethical and Professional Issues in Psychology and Counseling	3
PSYC 5312	Marriage, Couple, and Family Counseling Theories	3
PSYC 5313	Methods and Techniques in Counseling	3
PSYC 5323	Theories of Counseling and Psychotherapy	3
PSYC 5360	Cultural Psychology	3
PSYC 6301	Principles of Human Development	3
PSYC 6302	Measurement and Appraisal	3
PSYC 6305	Individual Psychological Evaluation	3
PSYC 6308	Methods of Group Process	3
PSYC 6310	Clinical Psychopathology	3
PSYC 6320	Research Techniques and Procedures	3
PSYC 6343	Personality Assessment	3
PSYC 6395	Supervised Practicum	3
PSYC 6396	Supervised Internship and Consultation	3
HOURS NEEDED FOR LICENSED PSYCHOLOGICAL ASSOCIATE IN TEXAS		60
TOTAL HOURS IN DEGREE		66

DEGREE REQUIREMENTS FOR GRADUATION:

- Completion of 400 hours of supervised clinical experience, including 150 direct hours.
- Recommendation of the Department
- Transfer credits from another college or university will be reviewed and approved by the college and department.
- No grade below "C"
- Pass Student Readiness Evaluation
- Overall GPA of 3.00 or above.
- Admitted to Candidacy
- Pass Comprehensive Examination
- Candidate must complete degree within five (5) years

Advisor _____ DATE _____

Dean, College of Education & Behavioral Sciences _____ DATE _____

I HAVE READ AND AGREE TO ABIDE BY ALL REQUIREMENTS ON THE DEGREE PLAN

STUDENT SIGNATURE _____ DATE _____

THIS DEGREE PLAN IS NOT VALID UNTIL RECEIVED & PROCESSED BY THE OFFICE OF ACADEMIC RECORDS PROCESSED BY _____ DATE _____