

CLAS Academic Advising Center

C-1-140 Mackinac Hall

616-331-8585

Teaching Endorsement Planned Program

School Health Education Minor – Secondary Education

Student Name:

Date:

Email Address:

G#:

Transfer Institution(s):

Key: ✓ - Completed or In Progress W - Waived Highlighted - Still Needs to be Completed

School Health Education Minor – Required Courses

Course Number	✓	Course Name	Credits	Completed	Scheduled	Grade	Quality Points
BMS 105		Basic Nutrition	3				
BMS 202		Anatomy and Physiology	4				
BMS 222		Introduction to Public Health	3				
OR							
BMS 223		Public Health Concepts	3				
PED 206		Self-Health and Wellness	2				
PED 301		Methods of Teaching Health Education	3				
PED 270		School Health Education Curriculum and Evaluation	3				
PED 272		Reproductive Health	2				
SOC 252		Sociology of Drug Use and Abuse	3				

Cumulative GPA: _____

Notes:

Substitutions, Equivalencies, and Waivers Approved By:

Date:

Prepared By:

Date:

Academic Departmental Approval (Pending Completion of Highlighted Requirements):

Date: