

University of Louisville  
College of Education and Human Development  
Requirements for Minor in Wellness Coaching

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_ Other Phone # \_\_\_\_\_ Zip \_\_\_\_\_  
 Student ID# \_\_\_\_\_  
 Email address \_\_\_\_\_  
 Advisor \_\_\_\_\_

Education Advising Center  
 College of Education and  
 Human Development  
 University of Louisville  
 Louisville, KY 40292  
 (502) 852-5597

COURSE PREFIX	COURSE NUMBER	COURSE TITLE	CREDIT HOURS	TENTATIVE SEMESTER OFFERED	HOURS EARNED	GRADE EARNED
<b>Core 12 hours</b>						
HSS	382	Wellness Coaching <i>Prerequisite: HSS 184 OR instructor consent</i>	3			
HSS	492	Get Healthy Now Wellness Coaching Internship	3			
HSS	597	Special Topics in HSS—Certified Peer Health Educator Training	3			
PSYC	450	Health & Exercise Psychology <i>Prerequisite: PSYC 201</i>	3			
<b>Select 6 hours from the following (No double counting courses for Major and Minor.)</b>						
HSS	302	Nutrition in Healthy Living	3			
HSS	394	Introduction to Exercise Science	3			
HSS	501	Stress and Tension Control <i>Prerequisite: HSS 202</i>	3			
HSS	503	Obesity: Causes, Control (fall only) <i>Prerequisite: HSS 202</i>	3			
PSYC	363	Life-Span Developmental Psychology <i>Prerequisite: PSYC 201</i>	3			
PSYC	366	Multicultural Psychology –WR <i>Prerequisite: PSYC 201 or PAS 200</i>	3			
SW	303	Generalist Practice I	3			
SW	304	Generalist Practice II <i>Prerequisite: SW 303</i>	3			
SW	397	Motivation and strategies to elicit intrinsic motivation (Motivational Interviewing) <i>Prerequisite: at least a Junior and minimum 3.0 GPA</i>	3			
Minimum total hours:			18			

**Entrance Requirements:** Declared major in HSS, PSYCH, Social Work, or Nursing.

**Exit Requirements:** 2.50 GPA is required in Wellness minor. Only one "D" will be accepted in HSS courses.

**Additional stipulations:** No double counting courses for Major and Minor.

Program sheet Addendum Y  N

**THIS PROGRAM SHEET MUST BE SIGNED BY THE ADVISOR AND THE STUDENT AND SUBMITTED TO THE EDUCATION ADVISING CENTER BEFORE THE STUDENT CAN BE UNCONDITIONALLY ADMITTED TO THIS PROGRAM.**

Student \_\_\_\_\_ Date \_\_\_\_\_ Advisor \_\_\_\_\_ Date \_\_\_\_\_  
 Copy to: EAC  Student  Advisor  Dept.