

MBA in Nonprofit Management
Full-Time Children, Youth, and Families ILP
 Student Name _____

Core Requirements – 52 credits

Course Number	Course Name	Credits	Semester Offered	Semester Taken
HS 253b	Leadership and Organizational Behavior	4	Fall 1	
HS 250a	Financial Accounting	4	Fall 1	
HS 246b	Statistics	2	Fall 1	
HS 245b	Economics I	2	Fall 1	
HS 248f	Economics II	2	Fall 1	
HS 258b	Operations Management	4	Spring	
HS 251b	Managerial Accounting	4	Spring	
HS 248b	Financial Management	4	Spring	
HS 252b	Strategic Management	4	Spring	
HS 285a	Marketing	4	Summer	
HS 215b	Corporate Finance	4	Summer	
HS 249f	Social Justice and Management	2	Summer	
HS 232a	Team Consulting Project Workshop	2	Summer	
HS 299a	Team Consulting Project	4	Summer	
HS 245a	Human Resource Management	4	Fall 2	
HS 247f	Evaluation for Managers	2	Fall 2	

Concentration Requirement

Course Number	Course Name	Credits	Semester Offered	Semester Taken
HS 511b	Contemporary Issues in Policies and Programs for Children, Youth and Families	4	Fall	
Concentration Suggested Courses (select at least 8 credits from the following)				
HS 312f	National and International Perspectives on Youth Policy and Programs	2	Spring	

HS 335f	Perspectives on Youth Policy, Program Management and System Design	2	Spring	
HS 334a	Child and Family Policy: U.S. and Cross-Cultural Perspectives	4	Spring	
HS 217f	Eli J. Segal Seminar in Citizen Leadership (Curnan)	2	Fall 2018 (Offered every other year)	
HS 324a	Social Experimentation in Child, Youth and Family Policymaking	4	Fall	
HS 534b	Assets and Social Policy	4	Fall	
ED 155b	Education and Social Policy	4	Fall	
HS 320f	American Gay Rights Movement	2	Spring 2018 (Offered every other year)	

Electives – minimum of 4 credits

Course Number	Course Name	Credits	Semester Taken

Core Requirements: 52
 Concentration Requirements: 12
 Electives: 4
 Total Required Credits: 68

Core Requirements Taken: _____
 Concentration Requirements Taken: _____
 Electives Taken: _____
 Total Credits Taken: _____

Signature of Student _____ *Date* _____

Signature of Advisor _____ *Date* _____