DECLARATION OF PROGRAM
Texas State University – College of Education Advising Center

Health and Wellness Promotion

Degree: Bachelor of Health and Wellness Promotion (BHWP)
Major: Health and Wellness Promotion (HWP)
Minor: ___________________________________________________________
Catalog Year: _____________________________________________________

Student Information
Name: _____________________________ Texas State ID: A0 ____________ Effective Semester: ____________
   o Initial Declaration (New Student Orientation)
   o Change from previous program: __________________________________________________

I understand that:

❑ The decision to change to a different major or program now or in a future semester will likely result in additional hours required for degree completion and delayed graduation and could potentially result in tuition for excessive attempted hours.
❑ Completion of an approved Minor is required for graduation in this program (cannot minor in Health & Wellness Promotion).
❑ The HED 4660 Internship in Health and Wellness Promotion is a 480-hour unpaid experience that must be completed at an approved site during a long (fall or spring) semester. Transportation and/or financial challenges are not justification for this requirement to be waived.
❑ A 2.5 Texas State GPA, ‘C’s in HED 4100 and 4640, and completion of all other coursework is required prior to enrollment in the Internship.
❑ Attendance at an organizational meeting the semester prior to enrollment in HED 4660 is required.
❑ HED 4640 Community Health Programming Planning and Evaluation should be taken concurrently with HED 4100 Professional Development in Health and Wellness Promotion the semester immediately prior to the Internship.
❑ A 2.0 Texas State GPA, 2.25 Major GPA, and 2.0 Minor GPA are required for graduation from this program.
❑ Regardless of catalog year, I will be held to current academic policies and course prerequisites which are subject to change.

Additionally, I recognize that the HED courses in my major have limited enrollments and are offered on a rotational basis (fall only or spring only, etc.). I may not be able to register for these courses in my desired academic year and should adjust my long-range plan accordingly.

Student Signature: _____________________________ Date: _____________________________
Advisor Signature: _____________________________ Date: _____________________________

4/22/14 JK47