

## Speech-Language Pathology Course Waiver Check Sheet

Student: \_\_\_\_\_ UNL ID #: \_\_\_\_\_  
 e-mail address: \_\_\_\_\_ Advisor: \_\_\_\_\_

If you took any of the courses listed below as part of your undergraduate program and believe the content is equivalent to the graduate course, take this form and the syllabus from your undergraduate class to the appropriate faculty member. After obtaining his or her signature, get your advisor's signature. Then, return the form to:  
**Mimi Mann, Room 314 Barkley Center.**

### Speech Disorders

Course number	Title	Institution	Credit	Grade	Term	Waived by:
SLPA 851 (fall)	Clinical Phonology	_____	___	___	___	_____
SLPA 865 (summer)	Voice Disorders	_____	___	___	___	_____
SLPA 885 (spring)	Fluency Disorders	_____	___	___	___	_____
SLPA 886 (fall)	AAC	_____	___	___	___	_____
SLPA 966 (spring)	Swallowing Disorders	_____	___	___	___	_____
SLPA 968 (spring)	Motor Speech Disorders	_____	___	___	___	_____
SLPA 853 (fall)	Neurology Basis for Speech and Language	_____	___	___	___	_____
SLPA 884 (spring)	Speech & Language Development of the Hearing-Impaired	_____	___	___	___	_____
SLPA 967 (summer)	Cleft Palate	_____	___	___	___	_____

### Language Disorders

Course number	Title	Institution	Credit	Grade	Term	Waived by:
SLPA 863 (fall)	Lang Dis: Elementary	_____	___	___	___	_____
SLPA 863L (fall)	Lab	_____	___	___	___	_____
SLPA 987 (spring)	Aphasia in Adults	_____	___	___	___	_____
SLPA 862A (fall)	Language Disorders: Birth to 3	_____	___	___	___	_____
SLPA 862E (fall)	Language Disorders: Preadolescents and Adolescents	_____	___	___	___	_____
SLPA 862J (spring)	Language Disorders: Severe Disabilities & Autism	_____	___	___	___	_____
SLPA 985 (spring)	Traumatic Brain Injury	_____	___	___	___	_____
SLPA 986 (spring)	Right Hemi Dysfunct.	_____	___	___	___	_____
SLPA 983A	Seminar in Early Lang.	_____	___	___	___	_____
SLPA 988 (spring)	Dementia	_____	___	___	___	_____

Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Speech-Language Pathology Undergraduate Certification Requirements Check Sheet

Student: \_\_\_\_\_ UNL ID #: \_\_\_\_\_

