

SPRING 2018 ELECTIVE REQUEST FORM

Student Name: _____

Student ID #: (w/o dashes) _____ Check one: MA1 ___ MA2 ___ OTD ___

Contact Phone: _____ Email: _____

SPECIALTY PRACTICE COURSES [Please select courses of interest and identify with an "X"]

- _____ OT 560 (4 Units): Contemporary Issues in School-Based Practice
- _____ OT 561 (4 Units): Occupational Therapy in Acute Care
- _____ OT 562 (4 Units): Advanced Practice in Hand Therapy and Physical Agent Modalities¹
¹(Must register for OT 573 Hand Rehab concurrently with OT 562 Advance Practice)
- _____ OT 563 (2 Units): Occupational Therapy in Primary Care Environments
- _____ OT 564 (4 Units): Sensory Integration
- _____ OT 565 (4 units): Sensory Integration Intervention²
²(Must register for OT 564 SI Theory concurrently with OT 564 SI Intervention)
- _____ OT 599 (4 Units): Special Topics in Sensory Integration
(Must take OT 564 and OT 565 concurrently)
- _____ OT 567 (4 Units): Contemporary Issues: Occupational Therapy in Early Intervention
- _____ OT 571 (4 Units): Assistive Technology
- _____ OT 572 (4 Units): Ergonomics
- _____ OT 573 (4 units): Hand Rehabilitation
- _____ OT 574 (4 Units): Enhancing Motor Control for Occupation
- _____ OT 575 (2 Units): Dysphagia Across the Lifespan
- _____ OT 577 (2 Units): Seminar in Occupational Therapy
- _____ OT 578 (4 Units): Therapeutic Communication for the Healthcare Practitioner
- _____ OT 579 (4 Units): Occupational Therapy in Adult Neurorehabilitation
- _____ OT 583 (4 Units): Lifestyle Redesign

CLINICAL EXPERIENCES (OT 500) [Interview Required. Please indicate number of units.]

- _____ OT 500 _____ Units: Faculty Practice Programs (Rice)
- _____ OT 500 _____ Units: Optimal Living w/Multiple Sclerosis (Uyeshiro)
- _____ OT 500 _____ Units: Family-Centered Care in a Residential Mental Health Setting (Heymann)
- _____ OT 500 _____ Units: Community Engagement for Individuals with Autism (Ochi)
- _____ OT 500 _____ Units: OT in Substance Abuse Treatment Service the Homeless (Bingamon)

DIRECTED RESEARCH (OT 590) [Interview Required. Please indicate number of units.]

- _____ OT 590 _____ Units: Rancho Los Amigos Rehab Center: COPM Study (Berro)
- _____ OT 590 _____ Units: Rancho Los Amigos Rehab Center: ETAC Study (Fanchiang)
- _____ OT 590 _____ Units: Rancho Los Amigos Rehab Center: Driving Program (Okada)

INDEPENDENT STUDY (OT 590/OT 500) [Advisement Required.]

Please contact Deborah Pitts at pittsd@chan.usc.edu to obtain an Independent Study Application Form

Course Number	Instructor	Units	Day	Time

COURSE OUTSIDE DIVISION

Course Number	Class Number	Units	Day	Time

DUE BY: 12:00 PM, October 18, 2017

Please return form to the Front Desk at CHP 133,
or email to wittrock@chan.usc.edu, or fax to 323.442.1540