

# Tohono O'odham Community College



## **Certificate in Community and Public Health**

This program is not yet eligible for Financial Aid

NAME:	TOCC ID:	
TOCC EMAIL:	PHONE NUMBER:	
TERM OF ADMISSION:	EXPECTED GRADUATION YEAR/TERM:	
ACADEMIC ADVISOR:	FACULTY ADVISOR:	

#### **General Education Courses:**

• Tohono O'odham Himdag (7 cr): HIS 122 (3 cr) and select one from the following: THO 101, THO 106 (4 cr) Note: All courses are 3 cr hrs unless otherwise indicated

COURSE PREFIX	COURSE NAME	REPLACEMENT COURSE	SEMESTER	YEAR	CREDITS	GRADE	MET
HIS 122	Tohono O'odham History and Culture						
ТНО							
WRT 101	Writing I						
BIO 127	Human Nutrition and Biology						
MAT 225	Basic Statistics						
	Total General Education Credits Needed: 17			Total Earned Credits:			

### **Core Requirements:**

COURSE PREFIX	COURSE NAME	REPLACEMENT COURSE	SEMESTER	YEAR	CREDITS	GRADE	MET
CPH 101	Exploring Careers in Health Professions (2 cr hr)						
PSY 132	Psychology and Culture						
SSE 211	Group Technique Applications						
CPH 178	Personal Health and Wellness						
SSE 123	Substance Abuse Prevention						
CPH 200	Introduction to Public Health						
	То	tal Core Credits Needed: 17		-	Total Earne	d Credits:	
Total Program Credits Needed: 34		Total Earned Credits:					

### **Certificate in Community and Public Health**

### This program is not yet eligible for Financial Aid

The Certificate in Community and Public Health is designed to meet the immediate workforce needs through direct employment. The certificate is a combination of cultural courses, community and public health courses, social work courses along with one course in each math, science, and writing.

### **Program Learning Outcomes:**

- 1. Compare the organization, structure, and function of healthcare, public health, and regulatory systems at local, tribal, and national levels.
- 2. Discuss how structural bias, social inequities, and racism impact health and create challenges in achieving equity.
- 3. Communicate culturally informed public health content effectively, both in writing and in oral presentations.

#### Students:

You must secure official approval by your advisor(s) before submitting the **final** Program of Study. By signing or entering your name below, you agree to the following statement: "Students are responsible for complete knowledge of Academic Catalog requirements in their degree plan and for adhering to all policies in Academic Catalog and Student Handbook."

#### **Signature Panel:**

Please indicate approval of the curriculum on the Program of Study by placing your signature (formal electronic signatures are permitted) in the space provided.

Student:	Date:
Academic Advisor:	Date:
Faculty Advisor:	Date:
Registrar:	Date:
Dean of Academics:	Date: