

Student Program Planning Worksheet

Student: _____

Educational Goal: _____

Degree or Certificate: _____

Plans to Transfer to: _____

Note: Some programs may require more than the four semesters offered below.

First Year

Fall Semester Year: _____		Spring Semester Year: _____		Summer Semester Year: _____	
COURSE	HOURS	COURSE	HOURS	COURSE	HOURS
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Second Year

Fall Semester Year: _____		Spring Semester Year: _____		Summer Semester Year: _____	
COURSE	HOURS	COURSE	HOURS	COURSE	HOURS
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Graduation Requirements

Passed Constitution Test: Yes No

Cummulative GPA: _____

Total Credits Earned: _____