

Four Year Course Plan

Name _____
 Student ID _____

Major _____
 Advisor _____

1st Year Fall _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

1st Year Spr. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

1st Year Sum. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

2nd Year Fall _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

2nd Year Spr. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

2nd Year Sum. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

3rd Year Fall _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

3rd Year Spr _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

3rd Year Sum. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

4th Year Fall _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

4th Year Spr. _____ (year)		
SUBJECT	COURSE #	CR. HRS.
Total Credits:		

Projected Graduation Date _____

Advisor Signature _____ Date _____

Student Signature _____ Date _____

Coordinator Signature _____ Date _____