

Four Year Course Plan

Name _____
 Student ID _____

Major _____
 Advisor _____

Freshman Fall _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Freshman Spring _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Freshman Summer _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Sophomore Fall _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Sophomore Spring _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Sophomore Summer _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Junior Fall _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Junior Spring _____ (year)		
DEPT	COURSE #	CR. HRS.
Total Credits:		

Junior Summer _____ (year)		
DEPT	COURSE #	CR. HRS.
Total Credits:		

Senior Fall _____ (year)		
DEPT	COURSE #	CR. HRS.
Total Credits:		

Senior Spring _____ (year)		
CLASS	COURSE #	CR. HRS.
Total Credits:		

Projected Graduate Date _____

Advisor Signature _____ Date _____

Student Signature _____ Date _____

Coordinator Signature _____ Date _____