



# STUDENT'S TWO-YEAR PLAN

*You must receive a B or better for a course to apply to your degree.*

Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Transfer credits (if applicable) (15 max.)

_____
_____
_____
_____
_____

I understand all information on this sheet. \_\_\_\_\_  
Student Signature

Committee Approval of Plan:

\_\_\_\_\_  
Advisor/Chair Signature

\_\_\_\_\_  
Member Signature

\_\_\_\_\_  
Outside Member Signature

\_\_\_\_\_  
Final Approval by Graduate Coordinator

\_\_\_\_\_  
Date