

Program Planning Agreement

Date: _____

Major/Department _____

Name: _____

Empl ID: _____

Semester/Year: _____

Major Courses

| | Code | Credits |
|----------|-------|---------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |

Pathways/Electives (Including Pre-Requisite Courses)

| | | |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |

Signature Authorization Progress

Major Advisor:

Print _____ Sign _____ Date _____

SEEK Counselor:

Print _____ Sign _____ Date _____

Student

Print _____ Sign _____ Date _____

Cc: White: SEEK

Yellow: Academic Department

Pink: Student