

SCHEDULE PLANNING FORM

Semester:	Semester:	Semester:
1.	1.	1.
2.	2.	2.
3.	3.	3.
4.	4.	4.
5.	5.	5.
6.	6.	6.
Semester credit hours:	Semester credit hours:	Semester credit hours:
Total credit hours:	Total credit hours:	Total credit hours:

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1.	1.	1.
2.	2.	2.
3.	3.	3.
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Please note:

- Any long range plan created by yourself or an advisor should be reviewed carefully each semester.
- Long range plans may need to be modified because of prerequisite changes and class availability.
- Prerequisites may change and you are responsible for meeting those currently in effect when you are taking the course.