

**PLAN OF STUDY FORM - 98/99**  
**ACCOUNTING/TRANSFER PROGRAM - 000302**  
 ASSOCIATE IN SCIENCE DEGREE  
 CREDITS REQUIRED - 63

**MOHEGAN CAMPUS - TRCTC**

NAME: \_\_\_\_\_

First

Last

STUDENT ID# \_\_\_\_\_

Advanced Credits:

Transfer Credits \_\_\_\_\_

Name(s) of transfer college(s) \_\_\_\_\_

#CLEP/DANTES \_\_\_\_\_

#Credit by Exam \_\_\_\_\_

#APL Credits \_\_\_\_\_

#Military credits \_\_\_\_\_

# A combined maximum of 30 credits may be used to satisfy degree requirements.

Computer Literacy Requirement met by: \_\_\_\_\_

<u>DEPT &amp; NO.</u>	<u>TITLE OF COURSE</u>	<u>CREDITS</u>	<u>SEMESTER COMPLETED</u>	<u>TO BE COMPLETED</u>
ACC 111*	Principles of Accounting I	4	_____	_____
ACC 112*	Principles of Accounting II	4	_____	_____
ACC 231*	Managerial Accounting	4	_____	_____
BUS 111	Introduction to Business	3	_____	_____
CSC 1175	Computer Applications I	3	_____	_____
ECO 111	Macroeconomics	3	_____	_____
ECO 112	Microeconomics	3	_____	_____
ENG 111*	College Composition	3	_____	_____
ENG 112*	Literature and Composition	3	_____	_____
ENG 221*	Managerial Communication	3	_____	_____
MGT 111	Principles of Management	3	_____	_____
MGT 113	Business Law I	3	_____	_____
MGT 114*	Business Law II	3	_____	_____
MRK 111	Principles of Marketing	3	_____	_____
HUMANITIES ELECTIVE: (English, Art, Music, Languages, Philosophy, Reading, Theater, Humanities)		3	_____	_____
MATH ELECTIVES: (MAT 109* or higher)		3	_____	_____
		3	_____	_____
OPEN ELECTIVE: (ACC 211 suggested)		3	_____	_____
SOCIAL SCIENCE ELECTIVES: (Anthropology, Economics, Geography, International Studies, Political Sciences, Psychology, Sociology, History, Social Sciences)		3	_____	_____
		3	_____	_____

\* Course has a prerequisite. Students should check course description in the catalog or semester class schedule.

**DEVELOPMENTAL COURSES COMPLETED:**

Writing Workshop \_\_\_\_\_

Semester/Year \_\_\_\_\_

Effective Reading \_\_\_\_\_

Semester/Year \_\_\_\_\_

Basic Math Skills \_\_\_\_\_

Semester/Year \_\_\_\_\_

Basic Algebra \_\_\_\_\_

Semester/Year \_\_\_\_\_

**PLAN OF STUDY REVIEWED BY:**

Advisor \_\_\_\_\_ Date \_\_\_\_\_

Student \_\_\_\_\_ Date \_\_\_\_\_

**Graduation Audit Completed by:**

Signature \_\_\_\_\_ Date \_\_\_\_\_