

PLAN OF STUDY FORM - 99/00
BUSINESS OFFICE TECHNOLOGY
MEDICAL SECRETARY OPTION
ASSOCIATE IN SCIENCE DEGREE
CREDITS REQUIRED - 61-62

MOHEGAN CAMPUS - TRCTC

NAME: _____
 First Last

STUDENT ID# _____

Advanced Credits:
 Transfer Credits _____
 #CLEP/DANTES _____
 #Credit by Exam _____
 #APL Credits _____
 #Military credits _____

Name(s) of transfer college(s) _____

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

Computer Literacy Requirement met by: _____

DEPT & NO.	TITLE OF COURSE	CREDITS	SEMESTER COMPLETED	TO BE COMPLETED
ACC K111*	Financial Accounting I	4	_____	_____
BUS K111	Introduction to Business	3	_____	_____
ECO K111	Macroeconomics	3	_____	_____
ENG K111*	College Composition	3	_____	_____
ENG K112*	Literature and Composition	3	_____	_____
ENG K221*	Managerial Communication	3	_____	_____
HSC K111	Personal Health	3	_____	_____
MAT K106*	Business Applications or higher math	3	_____	_____
BOT K111	Keyboarding on Computers	3	_____	_____
BOT K114*	Word Processing Applications I	3	_____	_____
BOT K117	Medical Terminology	3	_____	_____
BOT K120	Microsoft Works on the Macintosh	3	_____	_____
BOT K214*	Word Processing Applications II	3	_____	_____
BOT K216*	Machine Transcription	3	_____	_____
BOT K220*	Administrative Office Procedures I	3	_____	_____
BOT K221*	Administrative Office Procedures II	3	_____	_____
BOT K223*	Medical Office Procedures	3	_____	_____
BOT K225*	Business Office Technology Practicum	3	_____	_____
LIBERAL ARTS & SCIENCES ELECTIVES: (Humanities, Mathematics, Natural Sciences, Social Sciences)		3	_____	_____
SCIENCE ELECTIVE:		3-4	_____	_____

* 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 _____