PLAN OF STUDY FORM - 98/99
GENERAL STUDIES - 065600
CERTIFICATE PROGRAM
CREDITS REQUIRED - 30

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) _____

_____

_____

DEPT & NO.	TITLE OF COURSE	CREDITS	SEMESTER COMPLETED	TO BE COMPLETED
IDS 105**	First Year Experience	3		
ENG 111*	College Composition	3		
OPEN ELECTIVES:				
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____
_____	_____	3	_____	_____

* Course has a prerequisite. Students should check course description in the catalog or semester class schedule.
** Students should complete IDS 105 during their first or second semester at the College.

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