PLAN OF STUDY FORM - 99/00

MOHEGAN CAMPUS - TRCTC

HOSPITALITY MANAGEMENT
CASINO MANAGEMENT OPTION
ASSOCIATE IN SCIENCE DEGREE
CREDITS REQUIRED - 66

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.

DEPT & NO.	TITLE OF COURSE	CREDITS	PLANNED	COMPLETED
ACC K111*	Financial Accounting I	4	_____	_____
ENG K111*	College Composition	3	_____	_____
ENG K129*	Desktop Publishing	3	_____	_____
ENG K221*	Managerial Communication	3	_____	_____
HM K101*	Basic Foods	4	_____	_____
HM K102*	Quantity Food I	4	_____	_____
HM K111	Introduction to the Hospitality Industry	3	_____	_____
HM K141	Certification in Food Sanitation and Safety	3	_____	_____
HM K201*	Quantity Food Production II	4	_____	_____
HM K202*	Catering Management	4	_____	_____
OR	OR			
HM K245*	Tourism Management and Sales			
HM K210	Introduction to Wines, Beers, Spirits, and Beverage Management	3	_____	_____
HM K220*	Casino Operations	4	_____	_____
HM K250*	Hospitality Practice	3	_____	_____
MAT K106*	Business Applications or higher	3	_____	_____
MGT K111	Principles of Management	3	_____	_____
MGT K212	Human Resources Management	3	_____	_____
MRK K111	Principles of Marketing	3	_____	_____
PSY K111	Introduction to Psychology	3	_____	_____
LIBERAL ARTS & SCIENCES ELECTIVES#				
_____ _____	_____	3	_____	_____
_____		3	_____	_____

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

LAS Elective 1 - directed to take BIO K127; LAS Elective 2 - open

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