

PLAN OF STUDY FORM - 99/00

**HOSPITALITY MANAGEMENT
HOTEL MANAGEMENT OPTION
ASSOCIATE IN SCIENCE DEGREE
CREDITS REQUIRED - 66**

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.

<u>DEPT & NO.</u>	<u>TITLE OF COURSE</u>	<u>CREDITS</u>	<u>PLANNED</u>	<u>COMPLETED</u>
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 K230*	Hotel Operations	4	_____	_____
HM K250*	Hospitality Practicum	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 corequisite. 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 _____